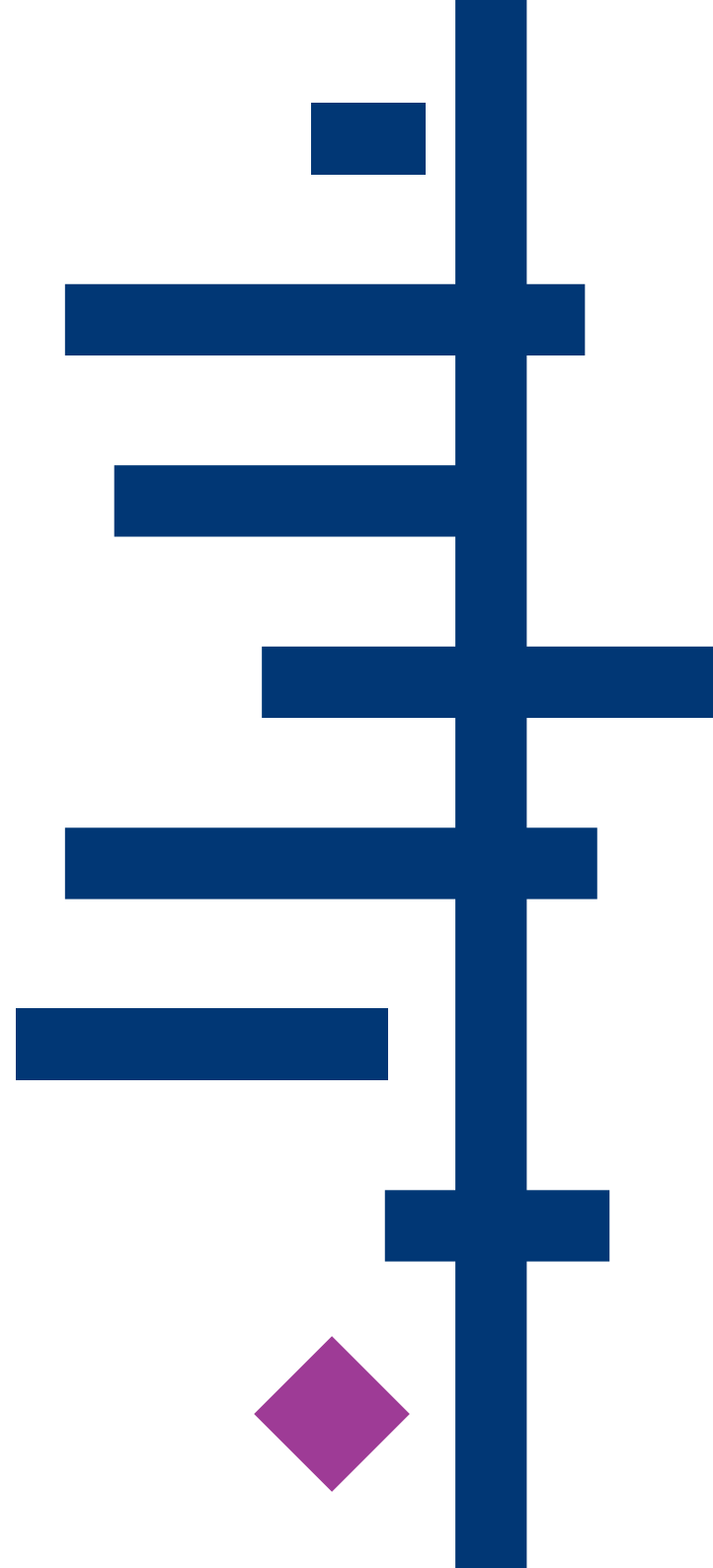# Cochrane

Brand Guidelines

**Trusted evidence.**
**Informed decisions.**
**Better health.**

## Cochrane exists so that everyone can be sure of the best healthcare decisions.

During the last 25 years we've helped to transform the way healthcare decisions are made.

Now, as part of Cochrane's *Strategy to 2020* we are showing that change by updating our identity so that we can:

- work more effectively in a digital world;

- present a unified look and feel to a wider universe; and

- make it easier for those new to Cochrane to understand what we are trying to achieve.

This document tells the story of our new identity.

## This document is a series of branding guidelines.

It is a toolkit to help all Cochrane Groups implement our new, coherent, visual and written identity. Its purpose is to give you the most up-to-date and relevant information in order to brand your Group, whether you are an existing Cochrane Group or a newly registered entity.

The contents provide an overview of Cochrane's story: who we are, what we do, and how we describe ourselves to a wider world - as well as make it easier for those new to Cochrane to understand what we are trying to achieve.

In addition, we are providing a section on language, organizational information, and standard policies and procedures as outlined in Cochrane's organizational policies (**community-archive.cochrane.org/organisational-policy-manual**). This will support your Group's external communications style.

It is not designed to be a style guide for Cochrane Reviews. We have our established **Cochrane Style Manual**, which is available at **community.cochrane.org/style-manual**.

These guidelines have been developed in English. We recognize that Cochrane Groups in different regions of the world will need flexibility in how to translate and apply these guidelines to their linguistic and cultural contexts; see more on page 35, Translation and Localization.

Along with these guidelines there are series of brand templates and usage documents which all Cochrane Groups are encouraged to use; these are available at **community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**.

# Contents

If you require further information about Cochrane's brand or have any questions about these guidelines, please contact support@cochrane.org .

# About Cochrane

# Who are we? What's special about us? How do we show that we are different?

Everyone who's part of Cochrane will have similar answers for these questions. However, by agreeing on one shared version, we become a more recognizable, more united, and a more effective collaboration.

This is what our brand does for us. It's more than just a logo: it distills everything that's great about Cochrane into one clear, strong identity.

This set of detailed brand guidelines sets out our brand: who we are and how we express our identity in the way we look and sound. You'll find examples, templates, and practical advice to help you create communications that are compelling — and instantly recognizable.

# Cochrane is a global independent network of researchers, professionals, patients, carers, and people interested in health.

We respond to the challenge of making the vast amounts of best available evidence generated through research useful for informing decisions about health.

Cochrane is a not-for-profit organization with collaborators from more than 130 countries working together to produce credible, accessible health information that is free from commercial sponsorship and other conflicts of interest.

**Find out more at cochrane.org**

**Follow us on Twitter @cochranecollab**

# Our logo tells a story...

The circle formed by two 'C' shapes represents our global collaboration.

The lines within illustrate the summary results from an iconic systematic review. Each horizontal line represents the results of one study, while the diamond represents the combined result, our best estimate of whether the treatment is effective or harmful.

The diamond sits clearly to the left of the vertical line representing "no difference", therefore the evidence indicates that the treatment is beneficial. We call this representation a "forest plot".

This forest plot within our logo illustrates an example of the potential for systematic reviews to improve health care. It shows that corticosteroids given to women who are about to give birth prematurely can save the life of the newborn child.

Despite several trials showing the benefit of corticosteroids, adoption of the treatment among obstetricians was slow. The systematic review published by Crowley *et al.* was influential in increasing use of this treatment. This simple intervention has probably saved thousands of premature babies.

During the past 25 years Cochrane has progressed the way healthcare decisions are made. And now we're leading another change, as outlined by *Strategy to 2020*. A visible expression of this change is our brand identity.

Our strength is in our people — an independent and highly respected global network that links the world of research with the reality of making informed health decisions.

Together we can use the new wealth of information we generate to achieve trusted evidence, informed decisions, and better health for everyone.

# Trusted evidence.
# Informed decisions.
# Better health.

Our strapline is the core idea that lies at the heart of everything we do. It expresses the essential reason why Cochrane exists.

Cochrane Groups are only permitted to use the logo and strapline in accordance with Cochrane's Logo and Endorsement Policy (**community.cochrane.org/organizational-info/resources/policies/logo-and-endorsement-policy**).

## Vision

**Our vision is a world of improved health**
where decisions about health and health care are informed by
high quality, relevant, and up-to-date synthesized research evidence.

## Mission

**Our mission is to promote evidence-informed health decision-making**
by producing high quality, relevant, accessible systematic reviews and
other synthesized research evidence.

## Goals

**Goal 1: Producing evidence**
To produce high quality, relevant, up-to-date
systematic reviews and other synthesized research
evidence to inform health decision-making.

**Goal 2: Accessible evidence**
To make Cochrane evidence accessible and useful to
everybody, everywhere in the world.

**Goal 3: Advocating for evidence**
To make Cochrane the 'home of evidence' to inform
health decision-making, build greater recognition
of our work, and become the leading advocate for
evidence-informed health care.

**Goal 4: Building an effective and sustainable
organization**
To be a diverse, inclusive, and transparent
international organization that effectively harnesses
the enthusiasm and skills of our contributors, is guided
by our principles, governed accountably, managed
efficiently, and makes optimal use of our resources.

The *Strategy to 2020*: community.cochrane.org/organizational-info/resources/support-cet-csg/strategy-2020

# Principles

**1  Collaboration**
by fostering global co-operation, teamwork, and open and transparent communication and decision-making.

**2  Building on the enthusiasm of individuals**
by involving, supporting, and training people of different skills and backgrounds.

**3  Avoiding duplication of effort**
by good management, co-ordination, and effective internal communications to maximize economy of effort.

**4  Minimizing bias**
through a variety of approaches such as scientific rigour, ensuring broad participation, and avoiding conflicts of interest.

**5  Keeping up to date**
by a commitment to ensure that Cochrane Systematic Reviews are maintained through identification and incorporation of new evidence.

**6  Striving for relevance**
by promoting the assessment of health questions using outcomes that matter to people making choices in health and health care.

**7  Promoting access**
by wide dissemination of our outputs, taking advantage of strategic alliances, and by promoting appropriate access models and delivery solutions to meet the needs of users worldwide.

**8  Ensuring quality**
by applying advances in methodology, developing systems for quality improvement, and being open and responsive to criticism.

**9  Continuity**
by ensuring that responsibility for reviews, editorial processes, and key functions is maintained and renewed.

**10  Enabling wide participation**
in our work by reducing barriers to contributing and by encouraging diversity.

We have three defining statements that guide our behaviour, culture, and decisions.

## Together we stand...

| for knowledge | for change | for you |
|---|---|---|
| We accept only the best evidence that research can provide. This sets us apart and makes us strong.<br><br>We express ourselves clearly and precisely, giving evidence for what we say. | We're working for a future where everyone can be sure of the best possible healthcare decisions.<br><br>We're positive, energetic, and forward-looking, giving encouragement and inspiration to those around us. | We're open, collaborative, and inclusive: everyone can get involved and everyone benefits.<br><br>We show warmth and humanity, using everyday language. |

If our organization was a person, you'd recognize these statements in their behaviour.
Our language guidelines explain how we can express standing for knowledge, for change, for you through our communications.

# Cochrane exists so that healthcare decisions get better.

During the past 25 years, Cochrane has helped to transform the way health decisions are made.

Cochrane produces reviews that summarize the best available evidence generated through research to inform decisions about health.

We are a global independent network of researchers, professionals, patients, carers, and people interested in health.

Our work is recognized as representing an international gold standard for high quality, trusted information.

We want to be the leading advocate for evidence-informed health across the world.

This is our standard way of describing Cochrane and starting conversations. We can vary it to suit different audiences as shown on page 13-14.

This is a series of brief statements which describe how Cochrane works with our six major stakeholders.

**How we support policymakers**

"We enable you to make better informed health policy decisions by bringing together all the best current evidence available."

**How we support the general public**

"We gather and summarize the best evidence from research to help you and your health practitioners make informed choices about the right treatments for you."

**How we support health practitioners**

"We make healthcare research useful and usable for you when advising your patients, to help you make decisions based on the best available and current evidence."

**How we support members of the Cochrane community**

"We're building a future of better health care for everyone, where treatment and policy decisions are based on the best current evidence. We can achieve this together, with your help."

**How we support our funders**

"We work collaboratively with funders to produce authoritative, relevant, and reliable health evidence.  Our work is produced by independent researchers who are unconstrained by commercial and financial conflicts. Cochrane's funding model reflects the international and diverse nature of the organization."

**How we support our partners**

"We work with our partners to increase the reliability and accessibility of evidence-informed health worldwide. Cochrane evidence has been used for the past 25 years to inform health decisions. Our new partnerships reflect our commitment to help improve the world's health through high quality, up-to-date research evidence, and to make this information accessible and easy to understand."

Cochrane Reviews are systematic reviews of primary research in human health care and health policy, and are internationally recognized as the highest standard in evidence-based health care. They investigate the effects of interventions for prevention, treatment, and rehabilitation. They also assess the accuracy of a diagnostic test for a given condition in a specific patient group and setting. They are published online in the *Cochrane Database of Systematic Reviews* in the Cochrane Library.

Each systematic review addresses a clearly formulated question; for example: Can antibiotics help in alleviating the symptoms of a sore throat? All the existing primary research on a topic that meets certain criteria is searched for and collated, and then assessed using stringent guidelines, to establish whether or not there is conclusive evidence about a specific treatment. Cochrane Reviews are updated as new evidence becomes available, ensuring that treatment decisions can be based on the most up-to-date and reliable evidence.

This is a standard way of simply describing what Cochrane does to an external audience.

The Cochrane Library is a collection of six databases that contain different types of high-quality, independent evidence to inform healthcare decision-making, and a seventh database that provides information about Cochrane Groups.

Systematic reviews are our main publication. They are published electronically in full text in the Cochrane Library. The abstracts and plain language summaries of all Cochrane Reviews are also freely available on **cochrane.org**

All Cochrane Reviews are published in the *Cochrane Database of Systematic Reviews* in the Cochrane Library – **cochranelibrary.com**

The Cochrane Library is published by Wiley.
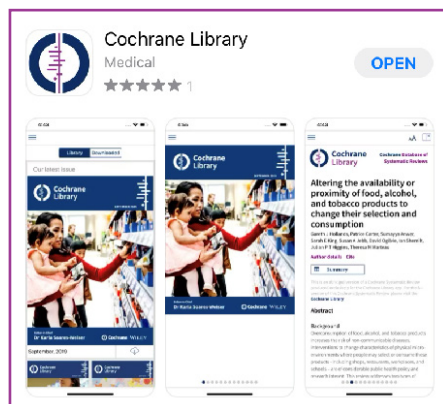
The Cochrane Library App presents the latest up-to-date evidence from the Cochrane Library in a convenient, easy-to-navigate format so you can read relevant, accessible research, when you need it, from the world's leading experts in evidence-informed health care.

Our monthly issues feature a hand-picked selection of Cochrane Systematic Reviews, specifically chosen by the Editor-in-Chief. Abridged Cochrane Reviews provide the best possible tablet and phone reading experience and they are downloadable for reading offline.

The Bookmark feature allows you to create your own special collection of Cochrane Reviews across issues. Additionally, the title page for every Review includes a link to the full version of the Review available on the Cochrane Library.

The app is freely available from iTunes: **itunes.com/apps/TheCochraneLibrary**.

# Language

# This section sets out how we want to present the language and tone of voice reflecting our identity to a wider world.

We have designed these guidelines to inform your group's external communications style.

They are a useful tool when writing communication reports, marketing and public relations materials.

They are not designed to be a style guide on how to write a Cochrane Review.

For this type of guidance, we have our established **Cochrane Style Manual,** which is available at **community.cochrane.org/style-manual**.

When writing all documents, Cochrane's 'house' style is UK with a 'z' spelling. We encourage you to use this style when producing official Cochrane documents. However, if you choose not to follow this recommendation, please ensure that your style choices are consistent throughout any document.

# Our name is Cochrane

To make things clear, and consistent and to maximize impact, we now refer to ourselves simply as 'Cochrane', in the singular.

For example:
'Cochrane is...'

We no longer say 'The Cochrane Collaboration'.

We are a collaboration as well as an organization, however; you can continue to talk about us as a collaboration, using a small 'c'.

For example:
'Cochrane is a worldwide collaboration...'.

# When communicating externally, everything we write counts.

Every piece of external communication we produce is an opportunity to help us achieve our goals to attract support for our work and make Cochrane better known. It is a chance to achieve our mission of promoting evidence-informed health decision-making.

The tone of our language, what we say, and how we say it defines the way people respond to us.

By writing in a plain speaking tone that's true to our brand, we can bring to life all that is important about Cochrane.

# Finding our voice

Our three statements shape our behaviour, our decisions, and the personality or tone we convey in our writing:

## for knowledge

We write in a tone that's clear, confident and direct. Our language is precise, concise, and backed up with evidence.

## for change

Our writing conveys energy, optimism, and confidence. We focus on outcomes, use active language, and talk about the future.

## for you

We focus on our readers' interests, use their everyday language, and write as if we're talking face-to-face.

We are aiming for one clear, recognizable voice that is for knowledge, for change, for you.

# How does our tone of voice sound?

## What it is

✔ One clear, recognizable voice

✔ A conversation with your reader

✔ A valuable point of view

✔ An inspiring example

Here are some practical tips to help you write clear and effective external communications.

# Ready to write?

First, ask yourself:

**Who is my reader** and what do they want to know?

**What do I want to happen** as a result of this communication? What do I want my reader to do, think, and feel?

**What do I need to say?** What's the best order to say it in, and is there anything I can cut out?

**How should I say it?** Now you're ready to choose and apply the tone of voice techniques in our toolkit…

# For knowledge

We accept only the best evidence that research can provide. This sets us apart and makes us strong.

Techniques:

1. Get to the point

2. Show, don't tell

3. Be concise

We express ourselves in a clear, confident, direct way. We're precise and give evidence for what we say.

# 1.  Get to the point

Start with your conclusion, giving the benefit of your information up front.

**What it is**

✔ A is more effective than B. This review explains why.

**How to**

✔ Cochrane Colloquia are our annual flagship events, bringing together Cochrane contributors from around the world to discuss, develop, and promote Cochrane and help shape its future.

**What it's not**

✘ This review explores the relative merits of options A and B.

**How not to**

✘ Cochrane Colloquia are held in different locations each year and comprise business, scientific, and training sessions for Cochrane contributors.

## 2.  Show, don't tell

Don't just tell your reader what to think: show them with concrete facts, examples, and other evidence that gives the proof.

### What it is

✔ Our work is recognized by A, B, and C as the benchmark…

✔ We collaborate with…

✔ The review led to… [specific outcomes]

### What it's not

✘ Our work is widely recognized as the benchmark…

✘ We believe in collaboration

✘ The review had a significant impact

# 3. Be concise

Less is more. Break up text into short paragraphs and sentences and if in doubt, cut it out.

Delete

✗ The following orientation may be helpful in navigating this site

✗ At this moment in time

✗ As a respected collaboration

✗ Going forward / Ongoing

✗ We would like to take this opportunity to

✗ I am writing with regard to / First of all

✗ Please do not hesitate to / Please take time to

# For change

We're working for a future where everyone can be sure of the best possible healthcare decisions.

Techniques:

4. Talk about the outcome

5. Choose active language

6. Focus on the future

We take ownership of what we say, speaking in a way that's positive, active, and engaging.

# 4.  Talk about the outcome

You've already decided what you want your audience to do, think, and feel. Now write so that everything you say points towards these outcomes.

## What it is

✔ We're depending on you to help us make this project a success. It's easy to enrol but we need your form by 6 May.

## How to

✔ Tell us what you think works at Cochrane Colloquia, and how they could work better for you. Submit your opinions *here* by 28 Feb and help shape the future of our events.

## What it's not

✘ Should you wish to participate, please note that submissions for enrolment will close on 6 May.

## How not to

✘ We are interested in input from Cochrane contributors on their experiences of Cochrane Colloquia. Please note that the consultation period closes on 28 Feb.

# 5. Choose active language

Use the active voice to give a clear sense of people doing things and taking ownership of their tasks.

## What it is

✔ You can find out about training…

✔ I've read your email

✔ We're looking into it

✔ I'll get back to you by Friday

## What it's not

✘ Training resources can be found…

✘ Your enquiry was received

✘ Enquiries are being made

✘ You'll be informed in due course

# 6.  Focus on the future

Use future-focused words and phrases to talk about what will be.

| What it is | What it's not |
| --- | --- |
| ✔ we begin | ✘ we began |
| ✔ we want | ✘ we wanted |
| ✔ we will see | ✘ we have seen |
| ✔ we look ahead to | ✘ we look back on |
| ✔ we'll become | ✘ we have become |
| ✔ our plans | ✘ our experience |
| ✔ our ambitions | ✘ our heritage |

# For you
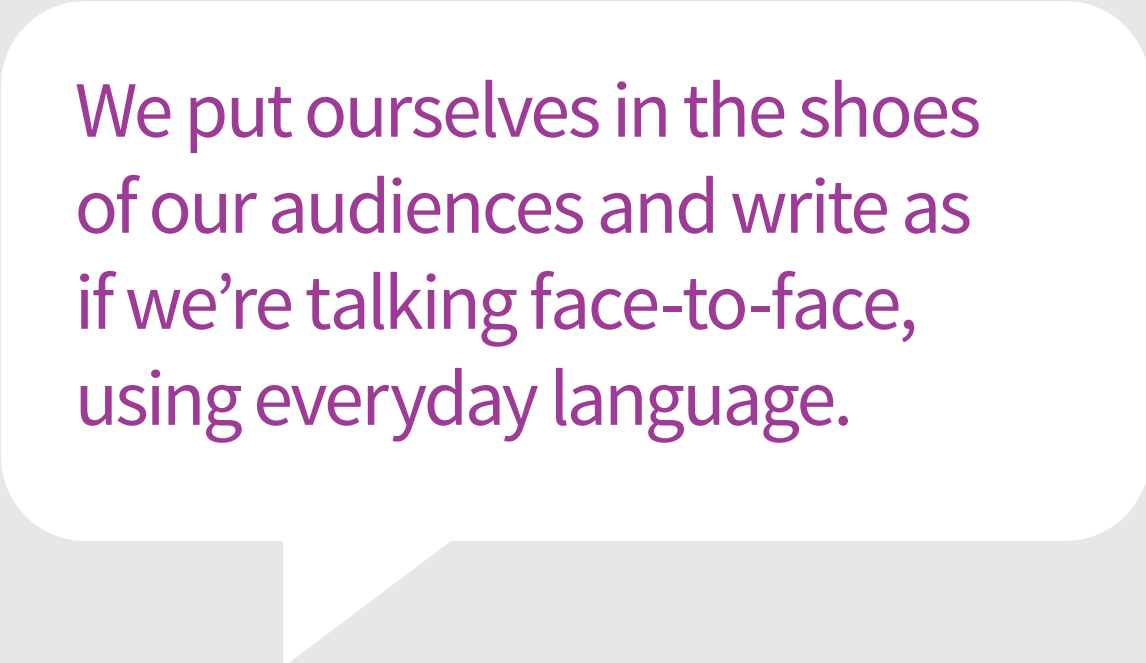
We're open, collaborative, and inclusive: everyone can get involved and everyone benefits.

Techniques:

7.  Step into your readers' shoes

8.  Use everyday words

9.  Say: you, I, and we

We put ourselves in the shoes of our audiences and write as if we're talking face-to-face, using everyday language.

# 7. Step into your readers' shoes

What's their agenda?

What's their interest?

What do they need to know?

Would they like to know?

Will it help them to know?

What's the best way to tell them?

Let these insights guide
what you say.

### What it is

✔ You can use this website to find
summaries of our latest reviews
of health evidence on any topic.

### What it's not

✘ The following orientation may
be helpful in navigating this
website…

✘ The website is designed with four
different sorts of pages…

# 8.  Use everyday words

Avoid unnecessary jargon, spell out abbreviations, and choose the shorter word.

| What it is | What it's not | What it is | What it's not |
|---|---|---|---|
| ✔ Start | ✘ Commence | ✔ Get | ✘ Obtain |
| ✔ Use | ✘ Utilize | ✔ Tell | ✘ Advise |
| ✔ Help | ✘ Assist | ✔ Thanks | ✘ Acknowledge |
| ✔ Ask | ✘ Request | ✔ Try | ✘ Endeavour |
| ✔ Need | ✘ Require | ✔ End | ✘ Terminate |

# 9.  Say: you, I, and we

Create a sense of direct dialogue by talking in the first and second person: you, your, yours, we, our, ours, us, I, my, and mine.

| What it is | What it's not |
| --- | --- |
| ✔ We | ✘ The department, the organization, the team, etc. |
| ✔ You | ✘ Colleagues, members, candidates, applicants, stakeholders, those individuals, etc. |

Cochrane Groups and contributors work in many different parts of the world. As a result, we communicate in many different languages and interact in a variety of social and cultural environments.

We have developed these brand and communication guidelines in English, and our messages need to be consistent across the world.

We do encourage you to translate, and if necessary, adapt these, so they are applicable in your local context and allow you to reach your local audiences.

You are the experts in your regions, and you know best what your audiences do and don't understand.

If you do not mainly communicate in English, we encourage you to take the time and translate at least the "About Cochrane" and "Language" sections of the brand guidelines into your main language of communication. This will provide you with a basic framework and point of reference on how to talk about Cochrane in your own language. It may be beneficial to involve a native-speaking translator or editor in this task to help with the linguistic side of the translation.

If you need any support or advice in relation to translating or localizing the brand guidelines and your communication materials, please visit our online Help and Support Centre

# Cochrane master brand design toolkit

Our visual identity is more than just a logo. It is a toolkit of parts designed to work in combination with each other. Together they provide Cochrane with a distinctive look and feel that can be applied across all media and communications materials.
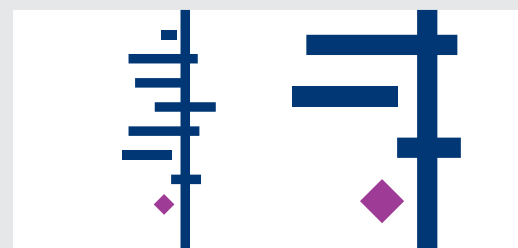
**Our logo**



**Colour**



**Typography**

Source Sans Pro Regular
Source Sans Pro Semi-bold
**Source Sans Pro Bold**

**Strapline**

Trusted evidence.
Informed decisions.
Better health.

**Systematic graphic**



**Imagery**



Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

The Cochrane logo tells a very important story (see page 7).
It is our brand's most important visual asset and as such all reproductions must use original artwork. Please do not redraw, alter, or recreate it.



Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

When communicating externally to a wide audience which includes our six major audiences, please use the master brand logo.

When communicating information about specific Cochrane evidence to a smaller niche audience (examples include researchers and academic or healthcare organizations), you are permitted to use the Cochrane Library logo together with the full citation of the Cochrane Review.

The Cochrane logo must be instantly recognizable in all applications. Wherever possible, we encourage you to reproduce it in colour. Where this is not possible, reversal or use in mono is the next best option.

**Our logo**
Our preferred colour variation. Please use wherever possible, ideally on a white or very light coloured background.

**Reversed logo**
For use in circumstances where the standard logo would not be legible. For example, when placing the logo on a coloured background or image.

**Mono logo**
For usage in situations where colour reproduction is not available. For example, one-colour print.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

The Cochrane logo should stand out as much as possible. We have created an exclusion zone to provide clear space between it and all other elements.

**Clear space**
The exclusion zone should be half the height of the circular symbol in our logo as shown. No other graphic elements (design or words) should appear in the clear space around the logo.



**Cochrane projects**
Projects within Cochrane **do not** have their own Cochrane logo. They use the master brand logo. However when producing Word documents you can write the title of your project next to the main logo, following this spacing guide.
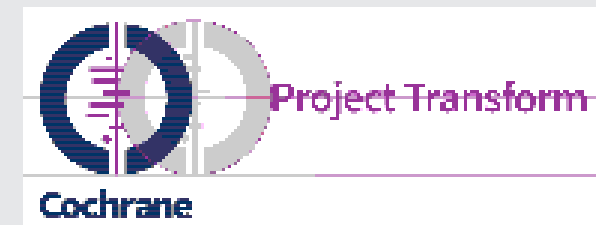
All printed materials should apply the Cochrane logo consistently. Wherever possible, place the logo in the top left corner and follow the recommended sizes detailed below. In exceptional circumstances, when this position does not suit the format, position the logo centrally as shown.
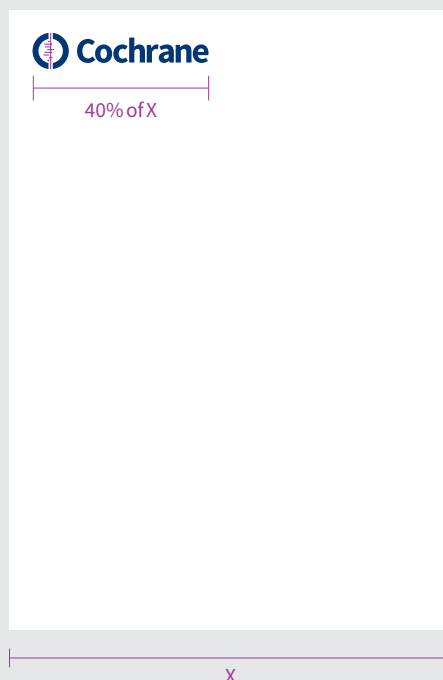
**Printed applications**
In printed materials, position the Cochrane logo in the top left corner and scale to 40% of the document's shortest side.

**Minimum size**
Avoid using the logo any smaller than 48mm unless the medium or format dictates otherwise.

**Templates**
Wherever possible, use document template files where our logo is already scaled to the correct size.

**Portrait**

Cochrane

40% of X

X

**Landscape**

Cochrane

40% of X

X

X

**Centred alternative**

Cochrane

40% of X

X

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

Online and other screen-based applications should also apply the Cochrane logo consistently. Always place the logo in the top left corner and follow the recommended sizes detailed below.

**Screen applications**
In online applications, position the Cochrane logo in the top left corner and scale to 30% of the site width.

For mobile websites and applications, increase this measurement to 50%.

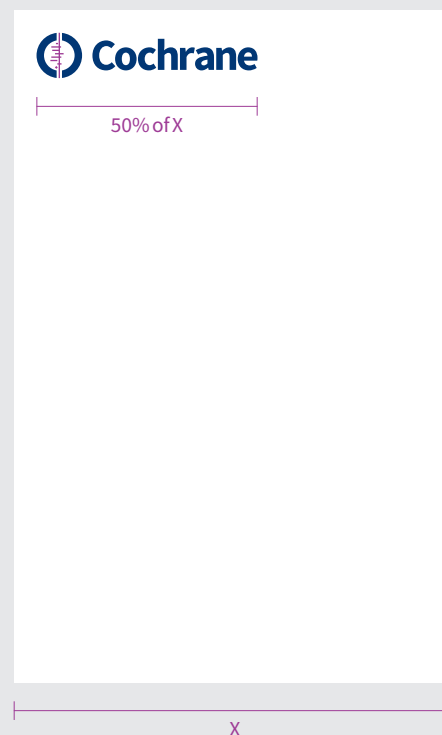For PowerPoint presentations, follow the guidance for printed applications shown on the previous page.

**Minimum size**
In pixel-based digital applications, aim never to use the logo any smaller than 200px wide.

**Desktop**
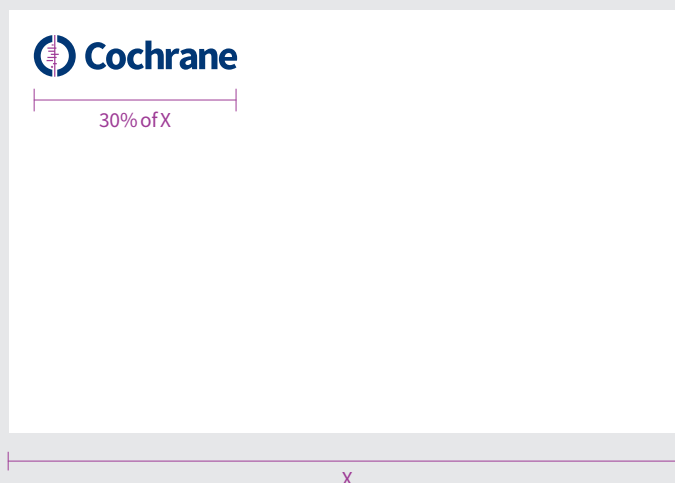
Cochrane

30% of X

X

**Mobile**

Cochrane

50% of X

X

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

Please treat the Cochrane logo with respect. It is the cornerstone of our brand and presentation should always be consistent, on- and offline.

Please do not modify or redraw the Cochrane logo in any way. Please do not use any background that impairs the visibility.

These examples show some common mistakes to avoid.



✕ Do not change the colour of the logo.



✕ Do not distort the shape of the logo.



✕ Do not add to any component parts or alter the graphic data lines within our logo.



✕ Do not outline the logo or add keylines.



✕ Do not add any effects to the logo.



✕ Do not use the logo on a background that affects legibility; always use the right logo for the application.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

A stacked format version of the Cochrane logo exists for usage where horizontal space is restricted. For example: social media profile images, online skyscraper ads, signage, merchandising, and when you are limited to a square space.

**Usage guidelines**
Please ensure, when using the stacked format logo, that all uses carefully follow our logo principles regarding colour, clear space, and misuse.



**Social media guidelines**
For social media profiles, use the circular graphic without the text. Carefully follow our logo principles regarding colour, clear space, and misuse.



Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

Our strapline expresses our mission:
<span style="color:purple">Trusted evidence. Informed decisions. Better health.</span>
The strapline must appear on materials representing the collaboration as a whole.

**Usage**
The strapline must always appear in Source Sans Pro Semibold and should be positioned in the bottom left corner.

Where this is not possible, please align the strapline with the logo in another adjacent corner.

Presentation may omit the strapline when 'Trusted evidence. Informed decisions. Better health.' is the document's main headline. (See example shown far right.)

The strapline can be used together with the Cochrane logo as any part of external communications representing Cochrane work.

community.cochrane.org/ organizational-info/resources/policies/ logo-and-endorsement-policy

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

Cochrane

Trusted evidence.
Informed decisions.
Better health.

Cochrane

Trusted evidence.
Informed decisions.
Better health.

Cochrane

Trusted evidence.
Informed decisions.
Better health.

Colour is integral to our identity. Please use our colour palette for all general communications produced on behalf of the collaboration as a whole.

The Cochrane master brand colour palette consists of the following colours:
Cochrane Blue + Cochrane Purple + white + black + four greys

**Cochrane Blue and Purple**
Please follow carefully the colour specifications shown to ensure consistent reproduction across different media.

**Cochrane Blue**

| | |
|---|---|
| Spot | Pantone 281 |
| CMYK | 100.72.0.38 |
| RGB | 0.45.100 |
| HEX | 002D64 |

**Cochrane Purple**

| | |
|---|---|
| Spot | Pantone 253 |
| CMYK | 42.91.0.0 |
| RGB | 150.45.145 |
| HEX | 962D91 |

**White space**
Without white our master brand colours won't stand out enough.

**White**

| | |
|---|---|
| CMYK | 0.0.0.0 |
| RGB | 255.255.255 |
| HEX | FFFFFF |

**Black and greys**
A neutral base for our communications. Black is ideal for long sections of text. Use greys to define and highlight information subtly.

**Black**

| | |
|---|---|
| CMYK | 0.0.0.100 |
| RGB | 0.0.0 |
| HEX | 000000 |

**Dark Grey**

| | |
|---|---|
| CMYK | 0.0.0.75 |
| RGB | 105.105.105 |
| HEX | 696969 |

**Mid Grey**

| | |
|---|---|
| CMYK | 0.0.0.50 |
| RGB | 153.153.153 |
| HEX | 999999 |

**Light Grey**

| | |
|---|---|
| CMYK | 0.0.0.25 |
| RGB | 204.204.204 |
| HEX | CCCCCC |

**Extra Light Grey**

| | |
|---|---|
| CMYK | 0.0.0.10 |
| RGB | 230.230.230 |
| HEX | E6E6E6 |

Download the Source Sans Pro font family from
**fontsquirrel.com/fonts/download/ source-sans-pro**

Source Sans Pro is an open, legible, and professional font family. We have selected it purposefully, to represent Cochrane's tone of voice in text. It is suitable for all applications, from print to online, and is free to download, allowing anyone to use it. Please do not use any other fonts.

**Source Sans Pro Regular**
This is our standard font weight and preferred version for body text and headlines across all applications.

# Regular

abcdefghijklmnopqrstuvwxyz
ABCDEFGHIJKLMNOPQRSTUVWXYZ
1234567890£$@%&!?+-*/=

**Source Sans Pro Semibold**
This version provides an additional font weight for when regular is too light and bold too heavy. For example, an introductory paragraph.

# Semibold

abcdefghijklmnopqrstuvwxyz
ABCDEFGHIJKLMNOPQRSTUVWXYZ
1234567890£$@%&!?+-*/=

**Source Sans Pro Bold**
This weight provides strong contrast to regular and is our preferred version for subheadings and highlighting text.

# Bold

abcdefghijklmnopqrstuvwxyz
ABCDEFGHIJKLMNOPQRSTUVWXYZ
1234567890£$@%&!?+-*/=

**Important information:**

- Use Source Sans Pro for all documents where possible.
- If sharing the documents with external groups, send the document as a PDF or image file.
- If sharing documents with other Cochrane colleagues and Groups, you will not need to save as PDF as they should have Source Sans Pro installed on their computer.
- If you are unable to share the document as a PDF or you are using websites to produce content, then use Arial.
- Arial is Cochrane's secondary font if Source Sans Pro cannot be used.
- For standard text , make it 11pt in size.

Typography is a key part of our brand. To create a consistent recognizable tone of voice in text, follow the guidelines below. Think carefully about how you use Source Sans Pro in applications. It is important that every piece of communication is clear, confident, and direct.

**Capitalization**
Always use sentence case text rather than 'Title Case' or 'UPPER CASE'.

## Use sentence case

**Text alignment**
Wherever possible, align text left. When this is not practical, align small amounts of text right or centred.

## Align text left

**Leading (line spacing)**
As a rough guide to line spacing, aim for around 20% leading. For example: 11pt text should be on 12pt leading.

## Aim for 20% leading (line spacing). The space between lines of text

**Tracking (character spacing)**
It is possible to reduce the space between characters slightly to improve readability.

## Tight spacing between letters

This example shows how to achieve a clear hierarchy of information using just three font sizes and three weights of Source Sans Pro.

Use this example as a starting point for your communications and help us to establish a clear, confident Cochrane tone of voice in text.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/
resources-groups/brand-resources**

## Neuraminidase inhibitors for preventing and treating influenza in children

**This review found that treatment with neuraminidase inhibitors was only associated with modest clinical benefit in children with proven influenza. Treatment with oseltamivir or zanamivir shortened the duration of illness in healthy children by about one day.**

**Background:**
During epidemics, influenza attack rates in children may exceed 40%. Options for prevention and treatment currently include the neuraminidase inhibitors zanamivir and oseltamivir. Laninamivir octanoate, the prodrug of laninamivir, is currently being developed.

**Objectives:**
To assess the efficacy, safety and tolerability of neuraminidase inhibitors in the treatment and prevention of influenza in children.

**Search strategy:**
For this update we searched the Cochrane Central Register of Controlled Trials (CENTRAL) (The Cochrane Library 2011, Issue 1) which includes the Acute Respiratory Infections Group's Specialised Register, MEDLINE (1966 to January week 2, 2011) and EMBASE (January 2010 to January 2011).

**Selection criteria:**
Double-blind, randomised controlled trials (RCTs) comparing neuraminidase inhibitors with placebo or other antiviral drugs in children aged up to and including 12 years. We also included safety and tolerability data from other types of studies.

**Data collection and analysis:**
Four review authors selected studies, assessed study quality and extracted data for the current and previous versions of this review. We analysed data separately for oseltamivir versus placebo, zanamivir versus placebo and laninamivir octanoate versus oseltamivir.

**Main results:**
Six treatment trials involving 1906 children with clinical influenza and 450 children with influenza diagnosed on rapid near-patient influenza testing were included. Of these 2356 children, 1255 had laboratory-confirmed influenza. Three prophylaxis trials involving 863 children exposed to influenza were also included. In children with laboratory-confirmed influenza oseltamivir reduced median duration of illness by 36 hours (26%, P < 0.001). One trial of oseltamivir in children with asthma who had laboratory-confirmed influenza showed only a small reduction in illness duration (10.4 hours, 8%), which was not statistically significant (P = 0.542). Laninamivir octanoate 20 mg reduced symptom duration by 2.8 days (60%, P < 0.001) in children with oseltamivir-resistant influenza A/H1N1.

Zanamivir reduced median duration of illness by 1.3 days (24%, P < 0.001). Oseltamivir significantly reduced acute otitis media in children aged one to five years with laboratory-confirmed influenza (risk difference (RD) -0.14, 95% confidence interval (CI) -0.24 to -0.04). Prophylaxis with either zanamivir or oseltamivir was associated with an 8% absolute reduction in developing influenza after the introduction of a case into a household (RD -0.08, 95% CI -0.12 to -0.05, P < 0.001). The adverse event profile of zanamivir was no worse than placebo but vomiting was more commonly associated with oseltamivir (number needed to harm = 17, 95% CI 10 to 34). The adverse event profiles of laninamivir octanoate and oseltamivir were similar.

**Authors' conclusions:**
Oseltamivir and zanamivir appear to have modest benefit in reducing duration of illness in children with influenza. However, our analysis was limited by small sample sizes and an inability to pool data from different studies. In addition, the inclusion of data from published trials only may have resulted in significant publication bias. Based on published trial data, oseltamivir reduces the incidence of acute otitis media in children aged one to five years but is associated with a significantly increased risk of vomiting. One study demonstrated that laninamivir octanoate was more effective than oseltamivir in shortening duration of illness in children with oseltamivir-resistant influenza A/H1N1. The benefit of oseltamivir and zanamivir in preventing the transmission of influenza in households is modest and based on weak evidence. However, the clinical efficacy of neuraminidase inhibitors in 'at risk' children is still uncertain. Larger high-quality trials are needed with sufficient power to determine the efficacy of neuraminidase inhibitors in preventing serious complications of influenza (such as pneumonia or hospital admission), particularly in 'at risk' groups.

This record should be cited as: Wang K, Shun-Shin M, Gill P, Perera R, Harnden A. Neuraminidase inhibitors for preventing and treating influenza in children (published trials only). Cochrane Database of Systematic Reviews 2012, Issue 4. Art. No.: CD002744. DOI: 10.1002/14651858. CD002744.pub4

Assessed as up to date: 25 January 2011

**Headline**
30/32pt
Source Sans Pro Regular

**Introduction text**
15/18pt
Source Sans Pro Semibold

**Subheadings**
10/12pt
Source Sans Pro Bold

**Main body copy**
10/12pt
Source Sans Pro Regular

Source Sans Pro currently supports a wide range of languages using Latin script, including extended characters and support for Cyrillic, Greek, and Vietnamese. Source Han Sans offers a set of Chinese, Japanese, and Korean fonts designed to complement Source Sans Pro.

## Source Sans Pro

**Not there?**
If your chosen language is not listed in Source Sans Pro, please Use Arial or Arial Unicode MS, Cochrane's secondary font.

B Yekan font can be used for Farsi.

**Latin and Latin Extended**
Afrikaans, Archaic Danish, Basque, Breton, Catalan, Croatian, Czech, Dutch, English, Esperanto, Estonian, Finnish, French, Gaelic, German, Hungarian, Icelandic, Indonesian, Irish, Italian, Latvian, Lithuanian, Norwegian, Polish, Portuguese, Romanian, Sami, Serbian (Latin), Slovak, Slovenian, Spanish, Swahili, Swedish, Turkish, and Welsh.

**Cyrillic and Cyrillic Extended**
Abaza, Adyghe, Agul, Avar, Balkar, Belarusian(Cyrillic), Bulgarian, Buryat, Chechen, Crimean Tatar(Cyrillic), Dargin, Dungan, Erzya, Ingush, Kabardian, Kalmyk, Karakalpak, Karachay, Kazakh, Lak, Lezgian, Khinalugh, Kyrgyz(Cyrillic), Kumyk, Macedonian, Moksha, Mongolian(Cyrillic), Nanai, Nivkh, Nogai, Russian, Rusyn, Rutul, Selkup, Serbian(Cyrillic) Tabasaran, Tajik, Tat, Tatar, Turkmen, Tuvan, Ukrainian, and Uzbek(Cyrillic).

**Others**
Archaic Greek, Modern Greek, and Vietnamese.

Download the Source Sans Pro font family from
**fontsquirrel.com/fonts/download/source-sans-pro**

## Source Han Sans

**Pan-CJK**
Japanese, Korean, Simplified Chinese, and Traditional Chinese.

Download Source Han Sans from
**sourceforge.net/projects/source-han-sans.adobe/files/**

The systematic graphic, better known as the forest plot, is a dynamic and distinctive layout device that brings a cohesive unity to Cochrane communications. We have created it by isolating and enlarging the review data from within our logo.

We have designed the systematic graphic to illustrate Cochrane's story. Please treat it with respect by following the guidelines and examples in this section to ensure that we tell our story correctly.

**A few dos…**

✔ Always place the graphic on the right hand side of layouts.

✔ Carefully position the graphic so it does not clash with the logo or enter its clear space.

✔ It's acceptable to scale up and crop the graphic, but the vertical line must always be visible.

✔ Position text, such as the document title, so that it aligns with the graphic shapes created.

✔ Aim to include the diamond shape, which symbolizes success, in layouts wherever possible.

✔ If in doubt, use the templates provided or follow the examples shown on the following pages.

**A couple of don'ts…**

✘ Never rotate, flip, skew, or distort the graphic in any way.

✘ Do not alter, change, edit or remove any parts from the graphic.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

## Flexibility

Designs may scale the systematic graphic up or down to suit the document contents and intended audience. This can range from simple, purely graphic layouts through to more complex layouts where the graphic works with imagery.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

**Templates**
The examples on these pages illustrate how you can use the digital templates. Use these files as a starting point for your reports and communications.
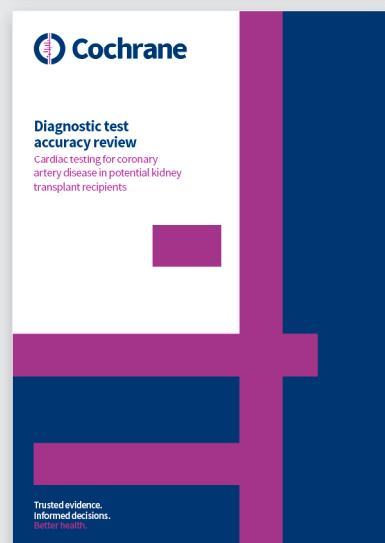


Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

When selecting images for communications materials, choose images that illustrate our strapline:

Trusted evidence. Informed decisions. Better health.

Choose light and bright imagery that works in harmony  with our colour palette.

## Trusted evidence

Clean, bright, close-up imagery of research trials, data analysis, and cutting edge healthcare evidence gathering .
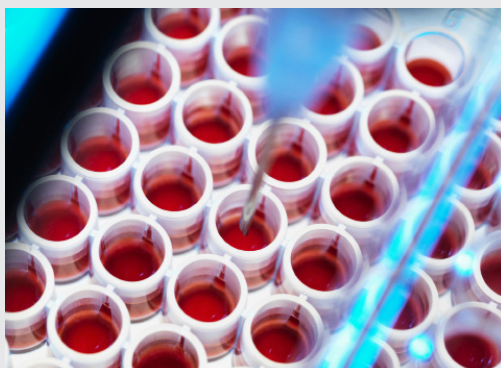
## Informed decisions

Positive, human images of engaged and culturally diverse decision makers collaborating with others in bright research and healthcare environments.

Images are vital when telling the story when we share evidence. They help our target audience see that content is relevant to them and to make an immediate connection with the topic. Thoughtful image choice can inform or misinform, attract or repel, and can help challenge assumptions and change conversation about health conditions.

To support those selecting images, Cochrane UK has developed 'Choosing images for sharing evidence: a guide'.

**Better health**

Simple, direct, and easy to understand, close-up images of everyday health review topics.
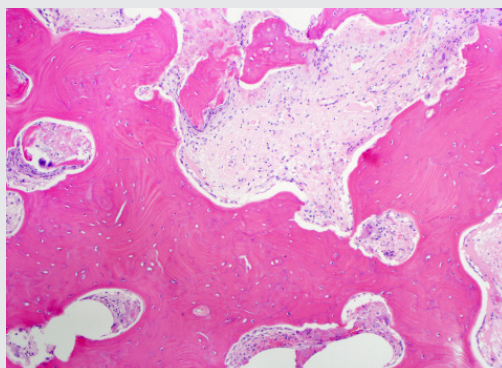


Contact mumoquit@cochrane.org to get access to Cochrane's stock photo collection.

When selecting images for communications materials, choose images where the main subject isn't disturbed by the dataline or other graphics.

Consider cropping or resizing images to the fit the area better, such as for the Community website feature image or on the cover of a report.

Free tools like **picmonkey.com** can be used to edit images, if you don't have access to photo editing software.

**How to use images**
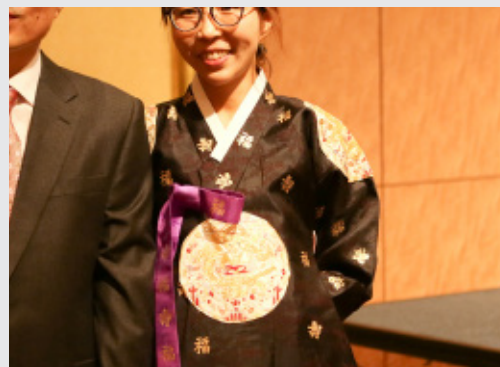
✕       ✓       ✕       ✓

## Literature



## Display



Left: Brochure cover
Right: Brochure text page
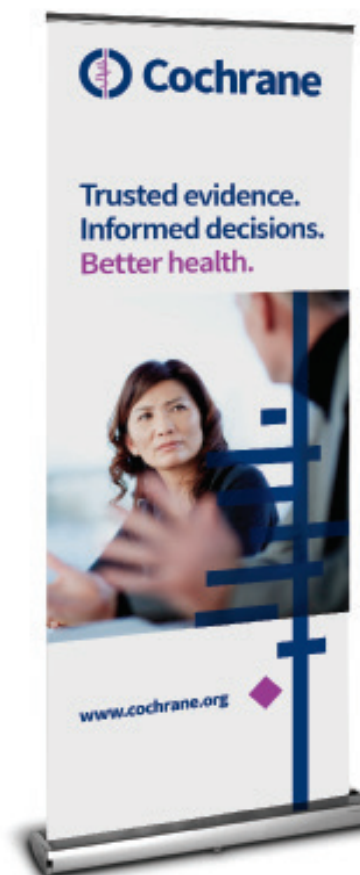
Left: Pop-up banner stand
Right: Poster

**Merchandise - The Cochrane Store**

**Personalized**

The Cochrane Store brings designs that celebrate evidence-based healthcare, take pride in the quality of systematic reviews, and show the world you are a supporter of high-quality Cochrane evidence! All money from sales are reinvested in helping people get involved in Cochrane.

Visit the Cochrane Store now

Left: T-shirt
Right: Mug and tote bag

Top: Business card
Bottom: Identity badge

**A0 poster templates**
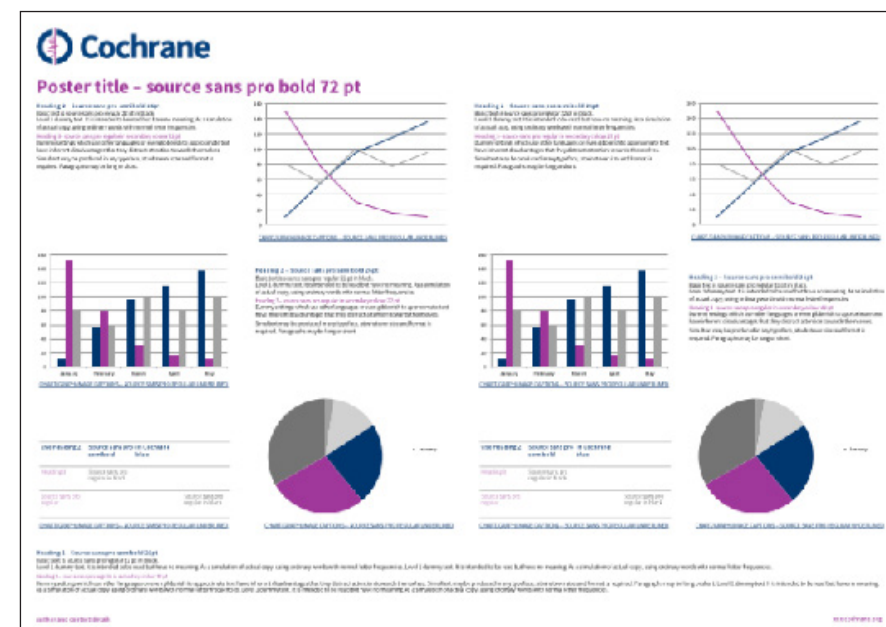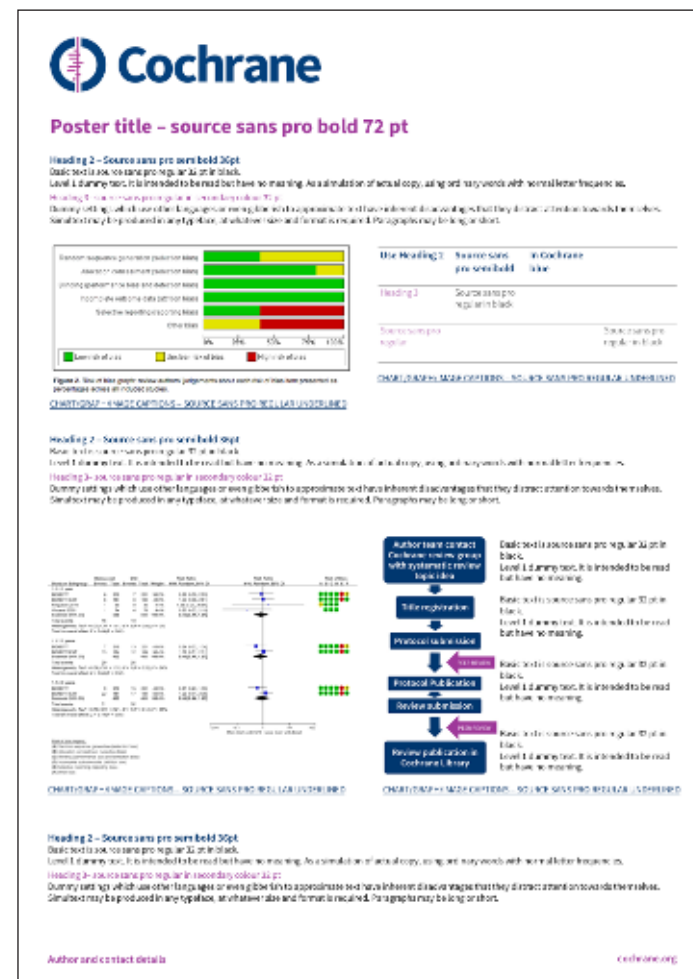


Left: Cochrane portrait scientific poster template
Right: Cochrane landscape basic poster template

**Presentation**
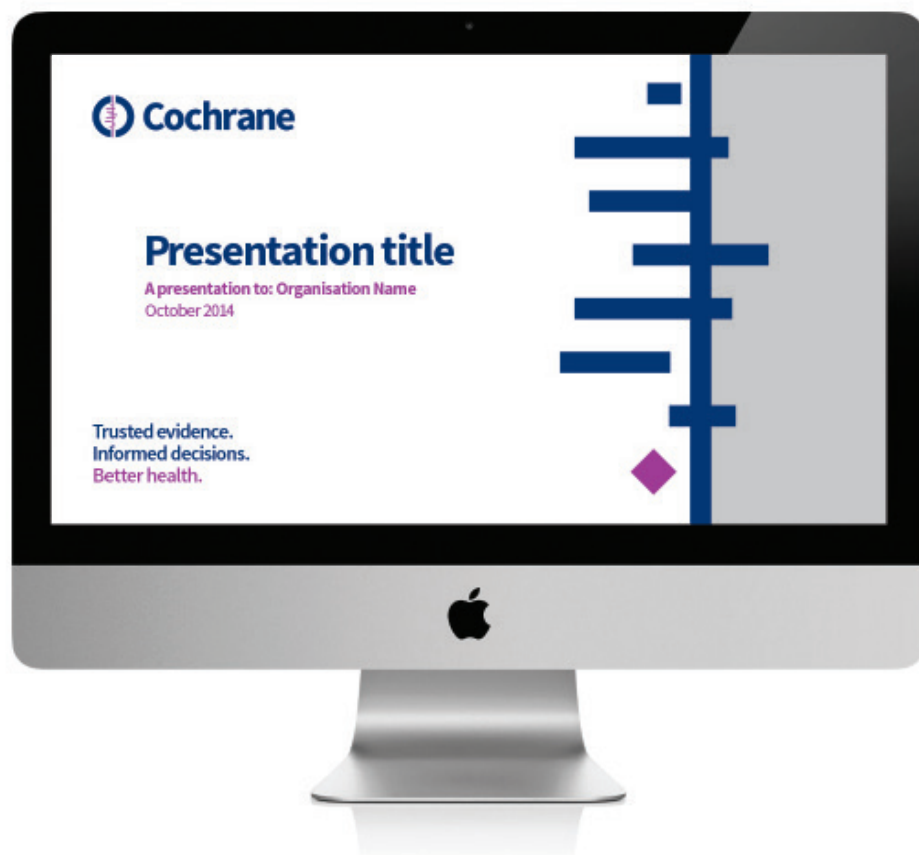


Left: PowerPoint title slide
Right: PowerPoint master slide

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

**Website**
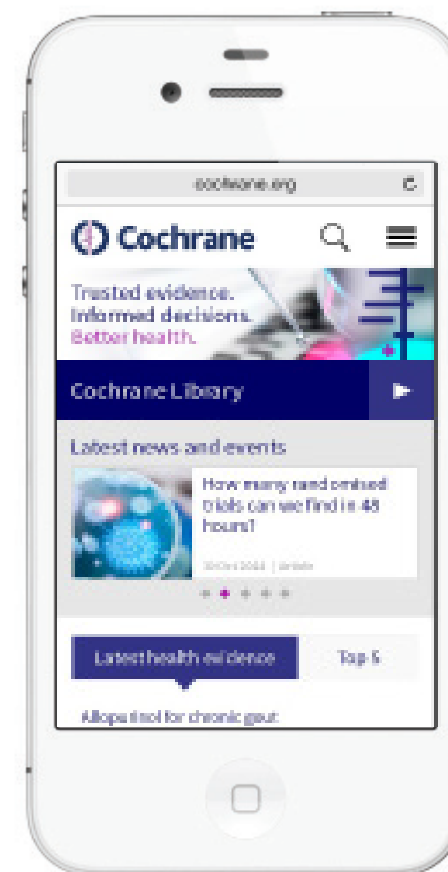


Left: Desktop homepage
Right: Mobile homepage

**Social media banners**
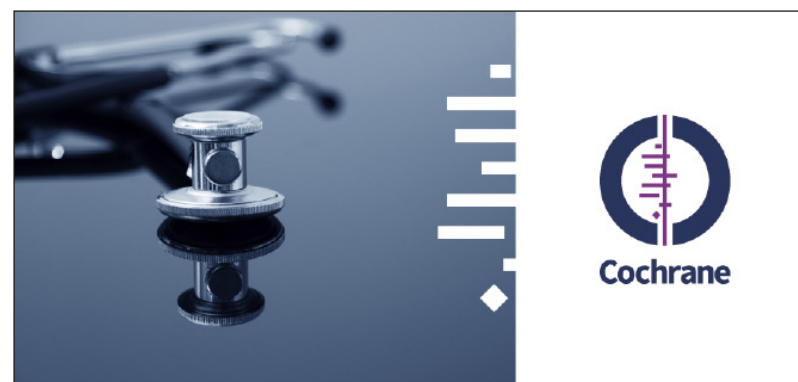




Left: Twitter banner
Right: Facebook banner

If your group would like a set of social media banners, email skhamissa@cochrane.org with a suggested banner image and a list of the banners needed.

## Infographics

Information graphics or infographics are graphic visual representations of information, data, or knowledge intended to present information quickly and clearly. They are an interesting and exciting way to represent graphic content to tell a story. You can also use pictures to illustrate the story.

Cochrane is exploring ways of using infographics to translate evidence, data, and information into easy insights and understanding to internal and external audiences.

Cochrane infographics need to align with our brand integrity, and here are some examples and templates you may wish to use. For more examples and how to use, please download the Cochrane infographic 'How to' guide.

Before you create your infographic, be clear about:

Who do I want to reach?
What do I want to say?
What's the best form for achieving this?
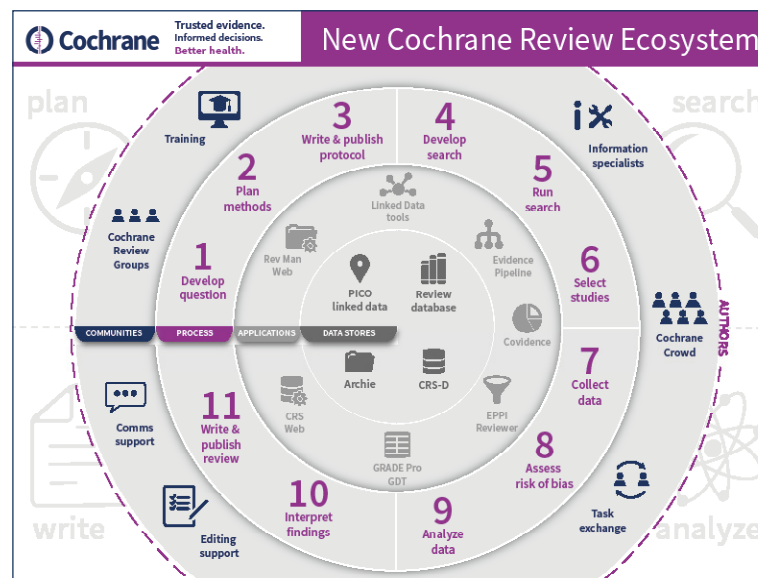






Left: Cochrane Translations infographic
Middle: New Cochrane Review Ecosystem infographic
Right: Cochrane evidence informs new UK child healthcare programme infographic

Download templates and 'How to' guides from **community.cochrane.org/organizational-info/ resources/resources-groups/brand-resources**

**MailChimp e-newsletter template**
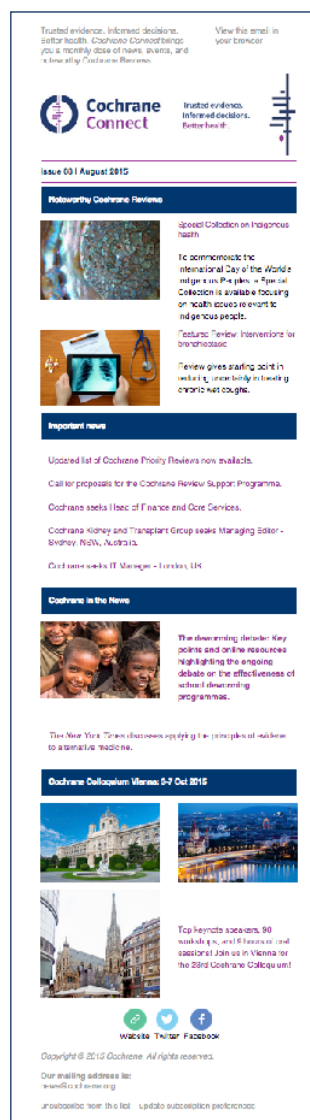




Left: Cochrane Connect newsletter
Right: Cochrane Community newsletter

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/**
**resources/resources-groups/brand-resources**

We have a collection of online and print templates available for all Cochrane Groups. There is also a series of 'How to' guides on how to use the Cochrane brand appropriately and in accordance with our Logo Endorsement Policy (**community.cochrane.org/organizational-info/ resources/policies/logo-and-endorsement-policy**).

**Templates that are available:**
- Basic Word documents (landscape and portrait)
- Detailed Word reporting documents (landscape and portrait)
- PowerPoint slides
- InDesign and PDF business cards
- Word certificate
- Email signature
- Word letterhead
- Word press release
- MailChimp e-newsletter template
- A0 PowerPoint poster templates (landscape and portrait)
- Blogshot and social media advert templates

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

Guidelines for applying the Cochrane brand in software tools are as follows:

## Principles

- The Cochrane brand should be integrated elegantly into all core tools to be used across Cochrane.
- Should a conflict between brand prominence and user experience occur, the user experience  must be favoured.
- New tools will be asked to follow these closely. For existing tools (ie. Archie, CDSR), these guideline should be implemented organically as part of the software's development cycle.

## Logo

- Use the main logo - possible though using Cochrane with the name of the tool underneath (i.e. Cochrane Task Exchange).
- We will use the main Cochrane fav icon for tools in the browser and when we have smaller responsive spaces where we want to show a minimum level of branding due to space constraints.
- The logo ideally should be in the upper left hand corner.

## Metanav and footer

- The standardized navigation element only applies to the homepage/log-in page of the tool and not when someone is working within the tool.
- The universal footer from Cochrane.org needs to be at the bottom of log-in pages.
- Quick links to other places should be in the upper right hand corner, as appropriate where a user would need to go elsewhere from the tool.

## Font

- Use Source Sans Pro.
- Follow the weighting and guidance of sizing as on the style sheet.

## Colour

- Core tools to be used across Cochrane will use the main colours of blue and purple.
- Other colours—use sparingly and only ones that are in the secondary brand palette. Use Green for "go"/"success", yellow for "warning" and red for "stop"/"danger".
- In graphics or where you need more colours, use them but be conscious that too much colour and relying on colour as a way to guide something through a page isn't always helpful and has its limits.
- The official Cochrane blue and purple colours meet online accessibility standards.

# Use of Cochrane logo and endorsement policy

**Cochrane logo and endorsement policy** Please inform the Knowledge Translations Department as soon as possible of any apparently inappropriate use of the logo, symbol, or name. Cochrane reserves the right to refuse all requests for use of the logo or for endorsement. The final decision rests with the Chief Executive Officer.

Email: skhamissa@cochrane.org

[community.cochrane.org/organizational-info/resources/policies/logo-and-endorsement-policy](community.cochrane.org/organizational-info/resources/policies/logo-and-endorsement-policy)

This policy sets out the terms of use for Cochrane's name and logo, and in what circumstances it provides endorsements to contributors or external parties. The guiding principle is that requests will only be approved if they support Cochrane's mission, and where the aims of the activities or organizations to be endorsed are aligned with its own aims and principles.

In particular, it should be noted that Cochrane has a strict non-commercial use policy preventing the use of our name, logo, information, and evidence for any promotional or advertising purposes. This policy helps ensure that Cochrane avoids even the appearance of endorsing a particular product or service for financial gain. It also guarantees that users of Cochrane evidence and products have access to the full context of our information and are not receiving limited and potentially misleading information through commercial sources.

It is important to distinguish the difference between Cochrane the organization, as represented by the main logo, and Cochrane projects and tools which are part of Cochrane's *Strategy to 2020* objectives.

**Cochrane projects**
Projects within Cochrane **do not** have their own Cochrane logo. They use the master brand logo. However, when producing documents you can write the title of your project next to the main logo, following this spacing guide as shown below.

**Cochrane tools**
Tools are allowed their own logo using the master brand colours. This is because they have their own web presence and people may use the tool without going through the Cochrane website.

### A Cochrane project:
*Project Transform is a specific project that is part of Cochrane's strategic objectives. It is visually represented by using the main Cochrane logo and its project name written as text separately.*

### A Cochrane tool:
*Cochrane TaskExchange is an external-facing user tool with its own functionality and online presence. It therefore has its own logo as part of the master brand.*

# Cochrane Community design toolkit

# The Cochrane Community includes a wide variety of contributors and Groups based around the world.

Our collaboration is united by our shared mission, vision, and goals, but our diverse Community members frequently work autonomously and with specific focus. As such there is a genuine need to identify and clearly differentiate some of our Groups.

The following pages outline how we do this. This framework allows individuality and expression within a clear structure, and leverages Cochrane's credibility without compromising trust in it.

**Cochrane master brand**
For communications about the collaboration as a whole and closely related services such as the Cochrane Library.

Use Cochrane Blue + Cochrane Purple (+ black + white + four greys)

General



**Cochrane community**
This means all officially registered and recognized Cochrane groups around the world.

Use Cochrane Blue + ONE colour from the community colour palette (+ black + white + four greys)

Groups

**For more information**
For more branding information regarding Structure and Function, please see page 107.

Cochrane is in a period of huge organizational change. In line with *Strategy to 2020's* Structure and Function reforms, there will be changes to Cochrane Groups. To reflect these changes, we have developed new brand guidance that includes new Group logos, usage guidelines, and templates.

The primary aim of our Group identities is to create unity, not uniformity. Follow the guidelines set out in our design toolkit, but with a change of logo, highlight colour, and imagery. This will provide each identity with visual autonomy while remaining strongly connected to Cochrane.

**Logo**
We will work with you to create a group logo for use on your communications.

**Colour**
Each group will choose its own colour from the Community palette to replace Cochrane purple.

**Imagery**
Be more expressive with image selection and illustrate your group's specific focus.

**Examples**
Follow the guidance provided by the design toolkit, but use your own logo, colour, and imagery. You can tailor the document templates provided to suit your group's specific focus and target audience.





Download all templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

**Cochrane Childhood Cancer**

**Document title**

Offici reraten duciassi dolupta sumqui ratus es es utem et mod ut pelentis acidere re nisi tem. Dersperum quate

Trusted evidence.
Informed decisions.
Better health.

**Cochrane Australia**

**Document title**

Teturios pernatur aut quam quiatem porestiures solorem corit, conet

Trusted evidence.
Informed decisions.
Better health.

**Cochrane Renal**

**Document title**

Consequatios conseque voluptatia que veribus ent Ibusdae suntiat

Trusted evidence.
Informed decisions.
Better health.

Download all templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

The primary means for creating sub-brand identity is through colour. Please base your Group's sub-brand around **ONE** of the six colour options shown below, in combination with Cochrane Blue.

Cochrane Community colour palettes consist of the following colours: Cochrane Blue + **ONE** Cochrane secondary colour + white + black + four greys (all other colour specifications are listed on )

**Sub-brand secondary colour palette**
Group sub-brand colour palettes should consist of the following:

• Cochrane Blue

• ONE Community colour

• Black, white and four greys

(all other colour specifications are listed on page 49)

Please do not use any colours other than those listed above in communications.

Using other colours will detract from and weaken your group's identity.

Our new community colours are all WCAG AAA compliant for large text and components. They are only WCAG AA compliant for normal text, so avoid using community colours at small text sizes wherever possible.

Please follow the colour specifications shown carefully to ensure consistent reproduction across different media.

**Cochrane Cyan**
| | |
|---|---|
| Spot | Pantone 2935 |
| CMYK | 100.52.0.0 |
| RGB | 0.87.183 |
| HEX | #0057B7 |

**Cochrane Red**
| | |
|---|---|
| Spot | Pantone 485 |
| CMYK | 0.95.100.0 |
| RGB | 225.35.40 |
| HEX | E12328 |

**Cochrane Teal**
| | |
|---|---|
| Spot | Pantone 3282 |
| CMYK | 100.4.56.8 |
| RGB | 0.133.120 |
| HEX | #008578 |

**Cochrane Orange**
| | |
|---|---|
| Spot | Pantone 1525 |
| CMYK | 100.4.56.8 |
| RGB | 185.71.0 |
| HEX | #B94700 |

**Cochrane Green**
| | |
|---|---|
| Spot | Pantone 7732 |
| CMYK | 89.0.96.30 |
| RGB | 0.122.62 |
| HEX | #007A3E |

**Cochrane Magenta**
| | |
|---|---|
| Spot | Pantone 226 |
| CMYK | 0.100.2.0 |
| RGB | 208.0.112 |
| HEX | #D00070 |

# It is a legal requirement that Cochrane meet <u>Web Content Accessibility Guidelines (WCAG) 2.0.</u>

*"Web Content Accessibility Guidelines (WCAG) 2.0 covers a wide range of recommendations for making Web content more accessible. Following these guidelines will make content accessible to a wider range of people with disabilities, including blindness and low vision, deafness and hearing loss, learning disabilities, cognitive limitations, limited movement, speech disabilities, photosensitivity, and combinations of these. Following these guidelines will also often make your Web content more usable to users in general.*

*WCAG 2.0 success criteria are written as testable statements that are not technology-specific."*

When using the secondary colour palette in digital form, we are aiming to meet the standardized web accessibility requirements. This means that when colours are used digitally, content may not be accessible for people with certain disabilities, i.e. software to help disabled users may not be able to translate the content if it doesn't match the guidelines.

There are conformance levels: A, AA, and AAA. The standards cover all types of accessibility, not only colour use.

# Cochrane colours vs. digital accessibility standards

All the official Cochrane Community colours tested meet the A conformance level. Some, however, do not meet the AA and AAA standards.

**We advise all Groups to adhere to the following guidelines:**

- Where possible in imagery and text use the Cochrane Blue, black, and dark grey, as they meet AA standards.
- If your secondary colour is orange, teal, or green, please write all text in Cochrane blue, black, or dark grey.
- Use semibold or bold font when using your secondary colour.
- Use the latest Community templates that have been updated to meet this guidance.

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

We will create Community logos for your Group using your choice of **ONE** colour from the Community palette. Wherever possible, your Group's logo should follow the examples shown below.

**Groups with short names**

For names that are shorter than twice the width of 'Cochrane', Group logos will use equal sized text with the descriptor on the second line.



Cochrane Netherlands

Cochrane Injuries

Cochrane Childhood Cancer

Cochrane Brazil

Cochrane Eyes and Vision

Cochrane Mexico

**Groups with long names**

For names that are longer than twice the width of 'Cochrane', Group logos will use a smaller text size, with the descriptor positioned on the second line and third line where required.

The Methods descriptor may appear alongside Cochrane on the top line. A lighter font weight creates differentiation between them and the Group's area of research.



Cochrane Haematological Malignancies

Cochrane Multiple Sclerosis and Rare Diseases of the CNS

Cochrane Methods Adverse Effects

Cochrane Pre-hospital and Emergency Care

Wherever possible, sub-brand logos should adhere to the main logo principles outlined in the design toolkit. This includes following guidelines regarding colour variations, clear space, size, position, and misuse.

**Colour variations**
Wherever possible use your Group's logo in colour. When this is not practical, use mono or reversed versions.

Cochrane
Malaysia

Cochrane
Incontinence

**Clear space**
The exclusion zone should be half the height of the circular symbol in our logo as shown. For further information see page 41.

Cochrane
Nederland

**Position**
Wherever possible, position the Cochrane logo in the top left corner.

Cochrane
Nursing Care

A stacked format version of your Group's Cochrane logo exists for usage where horizontal space is restricted. For example: social media profile images, online skyscraper ads, signage, merchandising, and when you are limited to a square space.

**Usage guidelines**
Please ensure, when using the stacked format logo, that all uses carefully follow our logo principles regarding colour, clear space, and misuse.
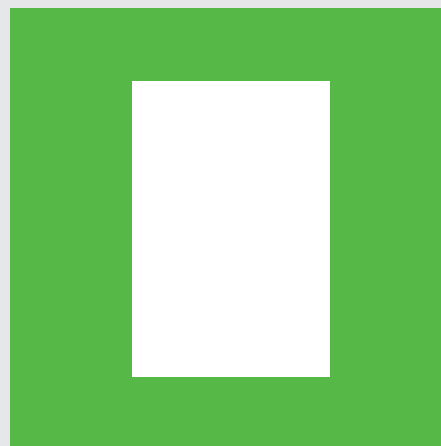


**Social media guidelines**
For social media profiles, use the circular graphic without the text. Carefully following our logo principles regarding colour, clear space, and misuse.

When selecting photography for Group applications, choose imagery that illustrates your location or focus and works in harmony with your colour. Be more expressive. Almost anything goes, so long as it reflects our shared mission, vision, and strapline.

Australia



Switzerland



Brazil



Eyes and Vision



Dental
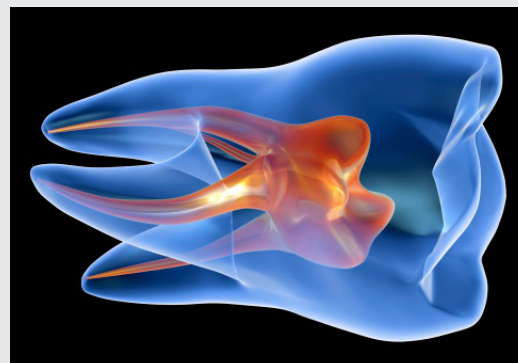


Renal
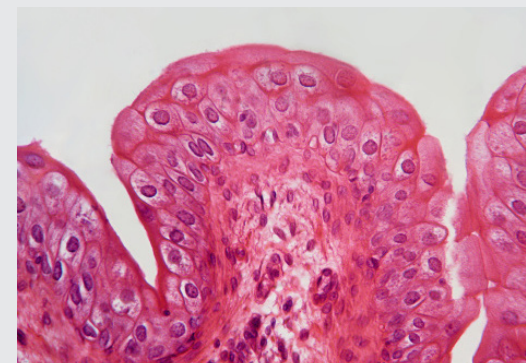


Contact mumoquit@cochrane.org to get access to iStock.com photo library

When selecting images for communications materials, choose images where the main subject isn't disturbed by the dataline or other graphics.

Consider cropping or resizing images to the fit the area better, such as for the website feature image or on the cover of a report.

Free tools like **picmonkey.com** can be used to edit images.

Choosing Images for Sharing Evidence: A Guide - for anyone who needs to choose images for a dissemination product based on any Cochrane Review.

**How to use images**
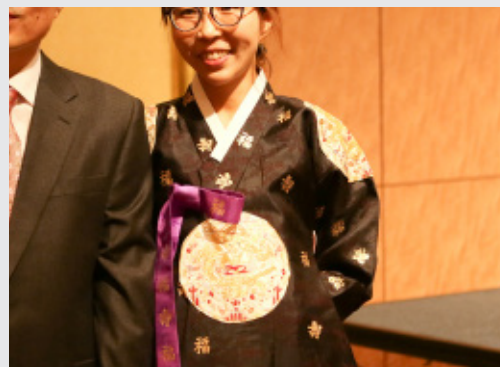
## How to use images and graphics

✕

1. 

2. 

3. 

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

✓



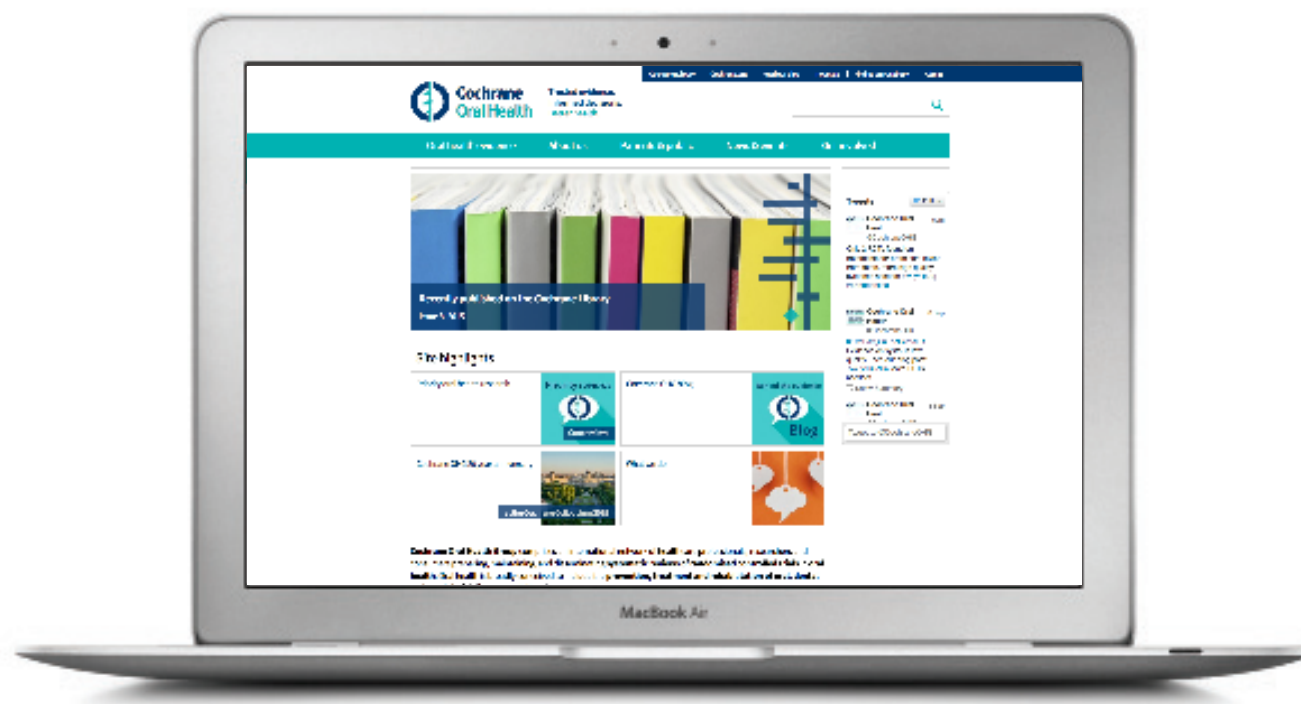## Recommendations:

Please follow the Community template user guides.
This guidance needs to be followed on all media and communications:

1. Confirm that appropriate images fill the space available in the templates provided.

2. Make sure the dataline and logo are resized, with the correct aspect ratio and no distorting.

3. Use graphics only in your group's community colour palette; please do not mix colours.

Where appropriate, it can be useful to use graphics or icons to communicate key information in online and print material.

These can either be sourced from stock libraries or created from scratch.

**How to choose suitable graphics or icons**

✕

✓
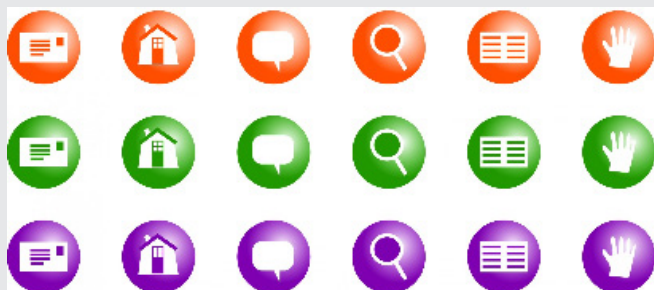


✕ Don't use lots of colours

✕ Don't use effects like shading or embossing

✕ Don't use icons or graphics that don't match each other

✕ Don't use icons or graphics that aren't clearly understood

✓ Use your group's colour palette

✓ Use flat, solid lines and shapes

✓ Use icons or graphics that are clearly understood or include a key or explanation

## Literature



## Display



Left: Brochure cover
Right: Brochure text pages

Left: Pop-up banner stand
Right: Poster

**Personalized**

**Merchandise**



Top: Business card
Bottom: Identity badge

Left: T-shirt
Right: Mug and pen
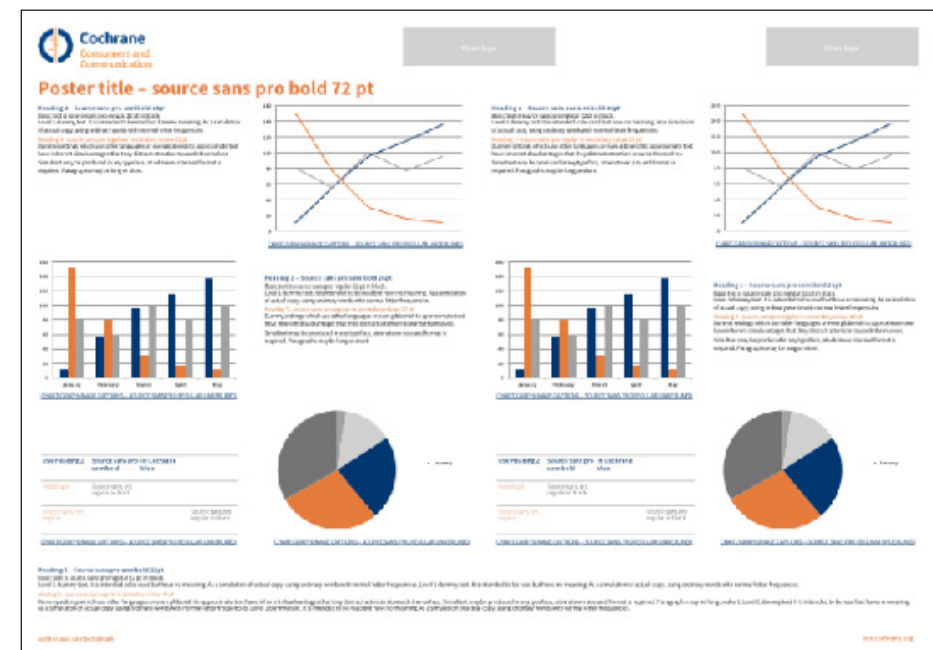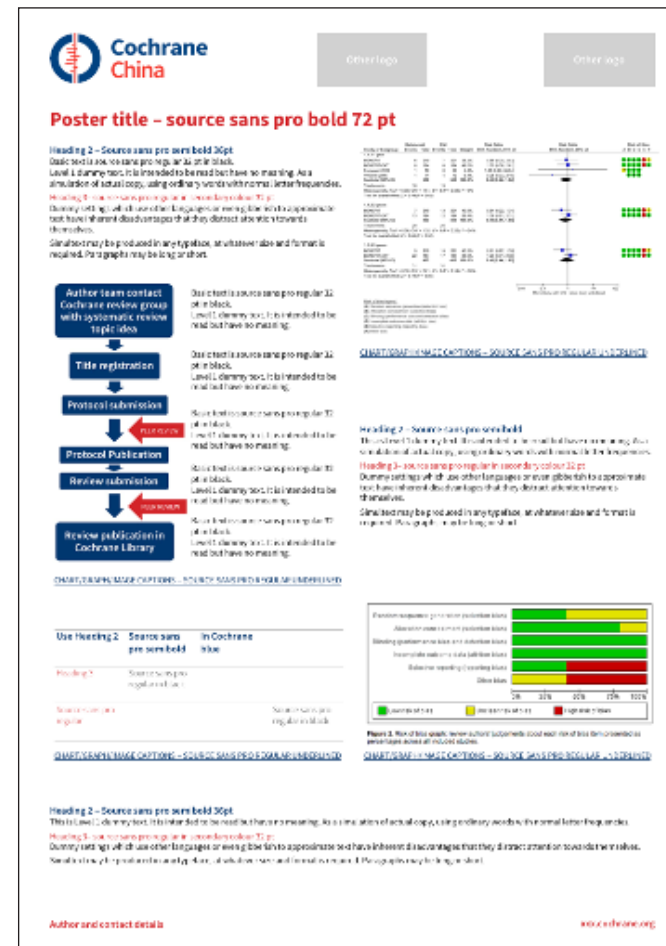
**A0 poster examples**



Left: Cochrane portrait scientific poster template
Right: Cochrane landscape basic poster template

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

**Presentation**



Left: PowerPoint title slide
Right: PowerPoint master slide

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

**Website**

**Social media**



Above: Homepage

Above: Twitter

## Social media banners







Left: Cochrane Mexico's Twitter page
Middle: Cochrane Canada's Facebook page
Right: Cochrane UK's Google+ page

If your group would like a set of social media banners, email skhamissa@cochrane.org with a suggested banner image and a list of the banners needed.
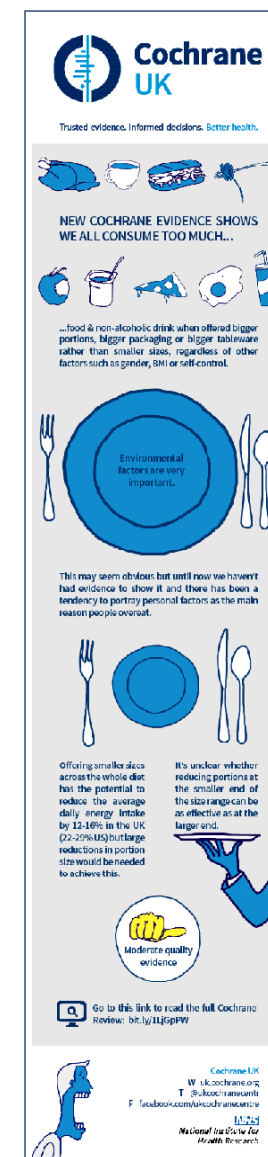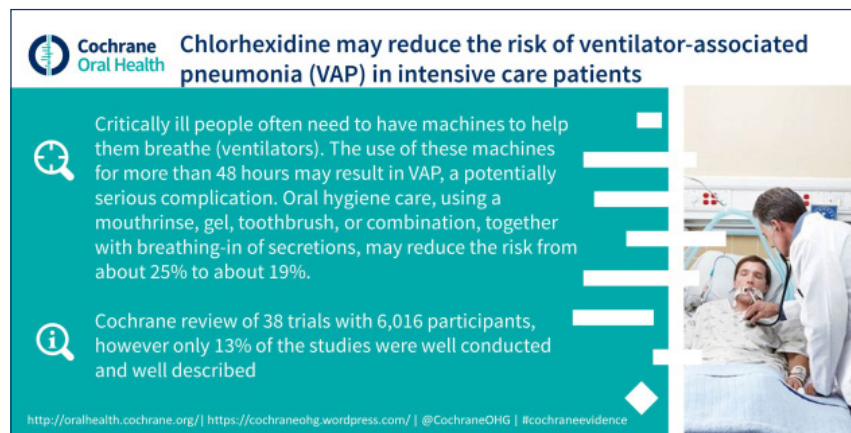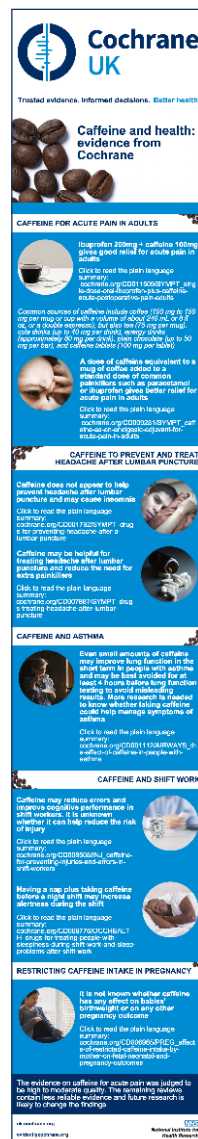
## Infographics and blogshots

Information graphics or infographics are graphic visual representations of information, data, or knowledge intended to present information quickly and clearly. They are an interesting and exciting way to represent graphic content to tell a story. You can also use pictures to illustrate the story.

Blogshots are a relatively new idea to Cochrane and another way of giving information in an image on social media platforms, especially Twitter. Like an infographic, blogshots are a summary of information created in graphic and pictorial form to make data easily understandable at a glance. It is another useful way to share Cochrane evidence.

Before you create your infographic or blogshot, be clear about:

- Who do I want to reach?
- What do I want to say?
- What's the best form for achieving this?





Chlorhexidine may reduce the risk of ventilator-associated pneumonia (VAP) in intensive care patients

Critically ill people often need to have machines to help them breathe (ventilators). The use of these machines for more than 48 hours may result in VAP, a potentially serious complication. Oral hygiene care, using a mouthrinse, gel, toothbrush, or combination, together with breathing-in of secretions, may reduce the risk from about 25% to about 19%.

Cochrane review of 38 trials with 6,016 participants, however only 13% of the studies were well conducted and well described

http://oralhealth.cochrane.org/ | https://cochraneohg.wordpress.com/ | @CochraneOHG | #cochraneevidence
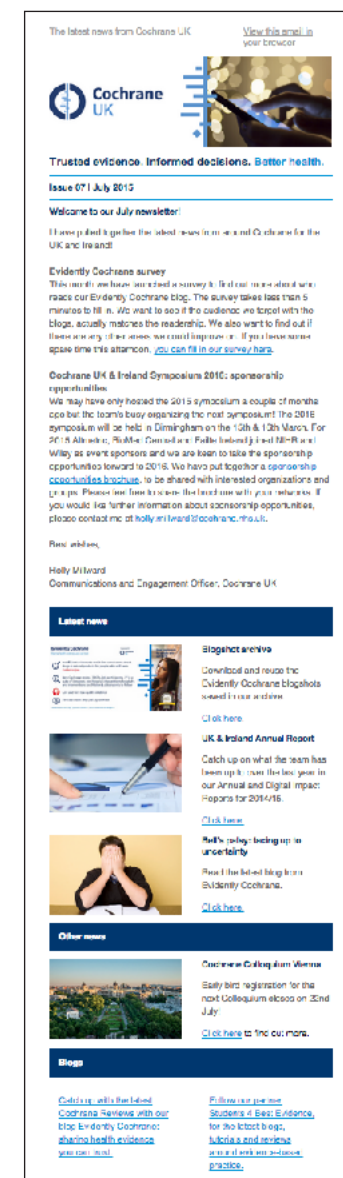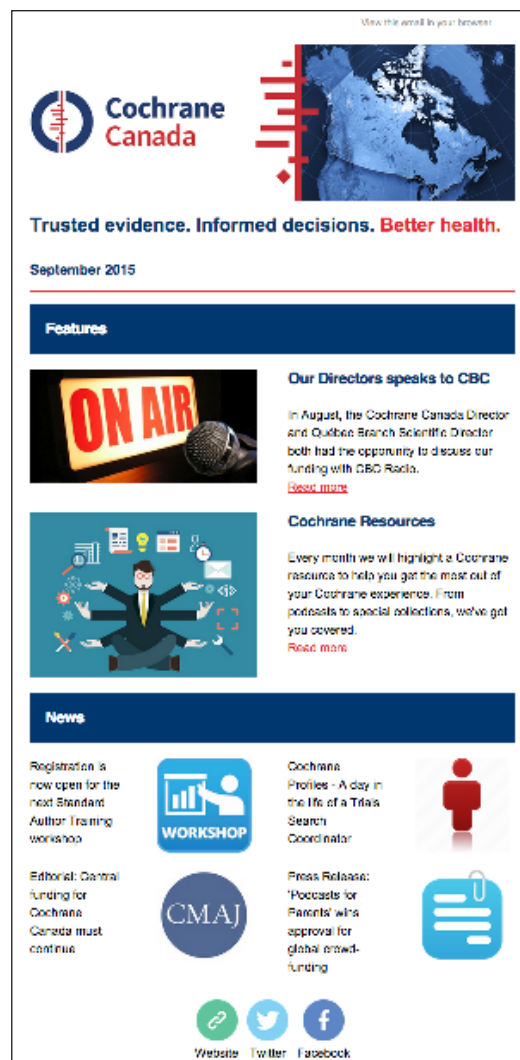


Left: Caffeine and health: evidence from Cochrane infographic
Middle: Cochrane Oral Health blogshot
Right: Portion size infographic

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

**MailChimp e-newsletter examples**





Left: Cochrane Canada newsletter
Right: Cochrane UK newsletter

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

We have a growing collection of online and print templates available in each of the secondary colours. We have also provided a series of 'How to' guides to help.

**Templates that are available:**
- Basic Word documents (landscape and portrait)
- Detailed Word reporting documents (landscape and portrait)
- PowerPoint slides
- InDesign business cards
- Word certificate
- Email signature
- Word letterhead
- Word press release
- MailChimp e-newsletter template
- A0 PowerPoint poster templates (landscape and portrait)
- Blogshot and social media advert templates

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

The Cochrane Community extends beyond the boundaries of our own collaboration to include external partner organizations.

This frequently includes our work in collaboration with publishers, funders, and contributors, among many others.

The following pages provide a simple framework that acknowledges their contribution through the inclusion of partner logos.

**Top of the page**
When appropriate, include partner logos in the top right corner of applications as shown on this page.

Where more than one partner needs to be acknowledged, arrange their logos vertically or horizontally, depending on available space.

Cochrane

WILEY

**Trusted evidence.**
**Informed decisions.**
**Better health.**

Cochrane
UK

NHS
National Institute for
Health Research

**Trusted evidence.**
**Informed decisions.**
**Better health.**

**Bottom of the page**

When appropriate, include partner logos in the bottom right corner of applications as shown on this page.

Where more than one partner needs to be acknowledged, arrange their logos vertically or horizontally, depending on available space.

Cochrane

Trusted evidence.
Informed decisions.
Better health.

WIKIPEDIA
The Free Encyclopedia

Cochrane
Australia

Trusted evidence.
Informed decisions.
Better health.

NHMRC

Australian Government
National Health and Medical Research Council

It is important to distinguish the difference between registered Cochrane Groups, as represented by their Group logo, and projects that are part of Cochrane Groups' core work programmes.

**Cochrane Group projects**
Projects within Cochrane Groups **do not** have their own Cochrane logo. They use the Group logo. However, when producing documents you can write the title of your project next to the main logo, following this spacing guide.

### Cochrane Oral Health Global Alliance example:
*Global Alliance is a specific project that is part of Cochrane Oral Health's strategic objectives. It is visually represented by using the main Cochrane Oral Health logo and its project name written as text separately.*
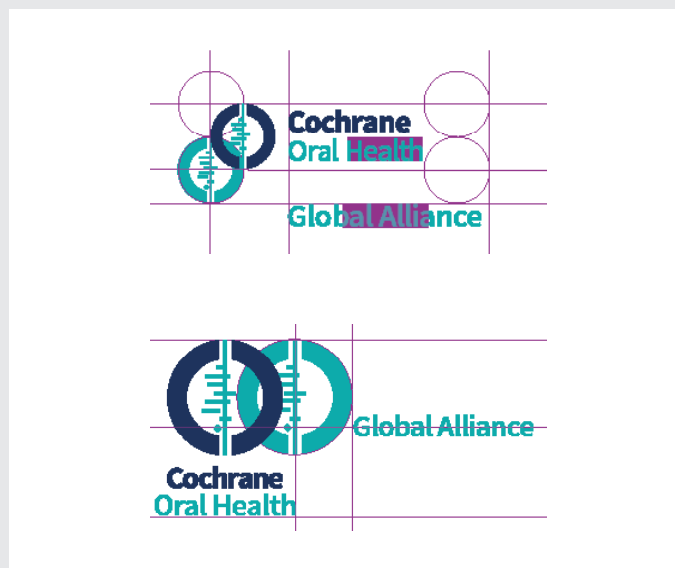
Guidelines for applying the Cochrane brand in software tools are as follows:

## Principles

- The Cochrane brand should be integrated elegantly into all core tools to be used across Cochrane.
- Should a conflict between brand prominence and user experience occur, the user experience  must be favoured.
- New tools will be asked to follow these closely. For existing tools (ie. Archie, CDSR), these guideline should be implemented organically as part of the software's development cycle.

## Logo

- Use the group logo.
- We will use the main Cochrane fav icon for tools in the browser and when we have smaller responsive spaces where we want to show a minimum level of branding due to space constraints.
- The logo ideally should be in the upper left hand corner.

## Metanav and footer

- The standardized navigation element only applies to the homepage/log-in page of the tool and not when someone is working within the tool.
- The universal footer from Cochrane.org needs to be at the bottom of log-in pages.
- Quick links to other places should be in the upper right hand corner, as appropriate where a user would need to go elsewhere from the tool.

## Font

- Use Source Sans Pro.
- Follow the weighting and guidance of sizing as on the style sheet.

## Colour

- Core tools to be used across Cochrane will use the main Community colour palette.
- Other non-Cochrane colours—use sparingly. Use Green for "go"/"success", yellow for "warning" and red for "stop"/"danger".
- In graphics or where you need more colours, use the official colour palette but be conscious that too much colour and relying on colour as a way to guide something through a page isn't always helpful and has its limits.
- See page 82 for information about online accessibility standards.

# Use of Cochrane logo and endorsement policy

**Cochrane logo and endorsement policy**
Please inform the Knowledge Translation Department as soon as possible of any apparently inappropriate use of the logo, symbol, or name. Cochrane reserves the right to refuse all requests for use of the logo or for endorsement. The final decision rests with the Chief Executive Officer.

[community.cochrane.org/organizational-info/resources/policies/logo-and-endorsement-policy](community.cochrane.org/organizational-info/resources/policies/logo-and-endorsement-policy)

This policy sets out the terms of use for Cochrane's name and logo, and in what circumstances it provides endorsements to contributors or external parties. The guiding principle is that requests will only be approved if they support Cochrane's mission, and where the aims of the activities or organizations to be endorsed are aligned with its own aims and principles.

In particular, it should be noted that Cochrane has a strict non-commercial use policy preventing the use of our name, logo, information, and evidence for any promotional or advertising purposes. This policy helps ensure that Cochrane avoids even the appearance of endorsing a particular product or service for financial gain. It also guarantees that users of Cochrane evidence and products have access to the full context of our information and are not receiving limited and potentially misleading information through commercial sources.

# Cochrane Transformation Programme: **Geographic Networks**

Cochrane Centres, Associates, Affiliates and Networks give Cochrane a geographic presence around the world. These Groups, among other, facilitate engagement with regional stakeholders; represent and promote Cochrane locally; build capacity for review production and use; engage in knowledge translation activities; as well as support advocacy work.

Read more information on Cochrane Transformation Programme here: tinyurl.com/zhffgmw

# Tier 1: Affiliate

A new small Group, which is responsible for promoting Cochrane  and our work in a specific country.

Example: Cochrane Romania



An affiliate can also be part of a wider national or regional Cochrane Network for example Cochrane Bologna is an Affiliate under Cochrane Italy and will therefore use the Cochrane Italy logo for any branded documents.

# Tier 2: Associate Centre

This is Cochrane's official 'representatives' in country, and has wider responsibilities including building formal partnerships, capacity for Cochrane Review production, and hosting Cochrane events.
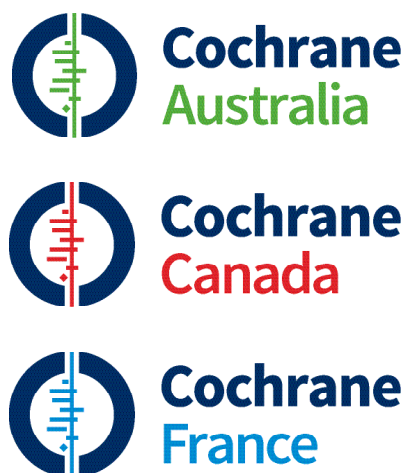
Examples: Cochrane Belgium and Cochrane Singapore

# Tier 3: Centre

To act as a coordinating Centre for all Cochrane activities within a country, including supporting Cochrane Review Groups, Fields, or Methods Groups that are based in that country.

Examples: Cochrane Australia, Cochrane Canada, and Cochrane France

# Tier 4: Geographic Network

A network of Affiliates with a coordinating Centre for all Cochrane activities across a country or an extended region. A Geographic Network promotes Cochrane's work throughout its country and region, including Knowledge Translation and multi-language activities. A Cochrane Geographic Network may represent a large and diverse country, a common language, regional links, or similarities in healthcare systems.

Regional example: Cochrane Africa Network

**Network**



**Coordinating Centre**

| | First Group to be established in a country | | |
| --- | --- | --- | --- |
| | **Affiliate** | **Associate Centre** | **Centre** |
| **Brand colour** | Choice of colour | Choice of colour | Choice of colour |
| **Logo** | Country logo | Country logo | Country logo |
| **Website** | One per country | One per country | One per country |
| **Social media channels** | One channel type per country | One channel type per country | One channel type per country |
| **How you can describe yourself** | Cochrane [country], a Cochrane Affiliate | Cochrane [country], a Cochrane Associate | Cochrane [country] or the [country] Cochrane Centre |
| **Archie** | Added to Archie as a standalone Group | Added to Archie as a standalone Group | Added to Archie as a standalone Group |
| **Benefits** | One free Cochrane Library license | One free Cochrane Library license | One free Cochrane Library license |

| | New Group within a regional Network (spanning multiple countries) | | | |
| --- | --- | --- | --- | --- |
| | **Affiliate** | **Associate Centre** | **Centre** | **Network** |
| **Brand colour** | Each country within the Network can choose a colour | Each country within the Network can choose a colour | Each country within the Network can choose a colour | The Network logo is the same colour as the coordinating Centre |
| **Logo** | Country logo | Country logo | Country and Network logo | Network logo held by the coordinating Centre |
| **Website** | One per country or page(s) on established country website | One per country or page(s) on established country website | One per country or shared use of established country website | Paragraph explaining Network on each country website |
| **Social media channels** | One channel type per country or shared use | One channel type per country or shared use | One channel type per country or shared use | Will be reviewed on a case by case basis |
| **How you can describe yourself** | Cochrane [country], an Affiliate of Cochrane [Network] | Cochrane [country], an Associate of Cochrane [Network] | Cochrane [country] or the [country] Cochrane Centre or Cochrane [country] coordinating Centre of Cochrane [Network] | Cochrane [Network] or Cochrane [Network] is coordinated by Cochrane [Centre] |

| | New Group within a national Network (within one country) | | | |
|---|---|---|---|---|
| | **Affiliate** | **Associate Centre** | **Centre** | **Network** (run by a coordinating task force) |
| **Brand colour** | Follow established national colour | Follow established national colour | Follow established national colour | Follow established national colour |
| **Logo** | National logo with regional specifier | National logo with regional specifier | Shared use of the national logo | Shared use of the national logo |
| **Website** | Page(s) on the national website | Page(s) on the national website | Shared use of the national website | Shared use of the national website |
| **Social media channels** | One channel type per country or shared use | One channel type per country or shared use | One channel type per country or shared use | One channel type per country or shared use |
| **How you can describe yourself** | Cochrane [country & region], an Affiliate of Cochrane [country] | Cochrane [country & region], an Associate Centre of Cochrane [country] | Cochrane [country] or the [country] Cochrane Centre or the coordinating Centre of the Cochrane [country] Network | Cochrane [country] or Cochrane [country] Network |
| **Archie** | Added to Archie as a subgroup of the Network | Added to Archie as a subgroup of the Network | Added to Archie as a subgroup of the main presence | Added to Archie as a subgroup of the main presence |

**Cochrane Transformation Programme: Geographic Networks**

**Setting up of a new Group: branding and online presence**
New Affiliates or Associate Centres who are not the first Group in the country

**116**

| | New Affiliates or Associate Centres who are not the first Group in the country | |
|---|---|---|
| | **Affiliate** | **Associate Centre** |
| **Brand colour** | Follow established national colour | Follow established national colour |
| **Logo** | Share established national logo | Share established national logo |
| **Website** | Page(s) on the national website | Page(s) on the national website |
| **Social media channels** | One channel type per country or shared use | One channel type per country or shared use |
| **How you can describe yourself** | [name], an Affiliate of Cochrane [country] | [name], an Associate Centre of Cochrane [country] |
| **Archie** | Added to Archie as a subgroup of the coordinating Centre | Added to Archie as a subgroup of the coordinating Centre |

**Cochrane Transformation Programme: Geographic Networks**

**Setting up of a new Group: branding and online presence**
Multiple Affiliates/Associate Centres that make up one Centre

117

| | Multiple Affiliates/Associate Centres that make up one Centre | | |
|---|---|---|---|
| | **Affiliate** | **Associate Centre** | **Centre** |
| **Brand colour** | Must follow the agreed secondary colour | All Associate Centres must agree and use one secondary colour to represent the country | All Associate Centres must agree and use one secondary colour to represent the country |
| **Logo** | Share one national logo | Share one national logo | Share one national logo |
| **Website** | Page(s) on the national website | Share one national website | One national website |
| **Social media channels** | One channel type per country or shared use | One channel type per country or shared use | One channel type per country |
| **How you can describe yourself** | [name], an Affiliate of Cochrane [country] or Cochrane [country] | [name], an Associate Centre of Cochrane [country] or Cochrane [country] | Cochrane [country] |
| **Archie** | Added to Archie as a subgroup of the Centre | Added to Archie as a subgroup of the Centre | Lead Associate Centre (for set time period): added to Archie as the coordinating Centre |

**Geographic Network template examples**

Name

Director
Cochrane Brasil Amazon
An Associate Centre of Cochrane Brasil

## Cochrane Brasil
## Amazon

**E** email@cochrane.org   **T** +44(0) 000 000 0000   **M** +44(0) 000 000 0000   **S** skypename
Address address address

**brazil.cochrane.org**

**Trusted evidence. Informed decisions. Better health.**

---

## Cochrane Brasil
## Amazon

Cochrane Brasil Amazon
Rua Borges Lagoa, 564 - Cj 63. Edifício
São Paulo
Brazil

T +55 (11) 55752970
E secretaria@cochrane.org.br

Address

14 September 2016

Dear XXX,

Cochrane Brasil Amazon is an Affiliate of Cochrane Brasil. There are four other Affiliates based in Rio de Janeiro, Paraíba, Ceará and Minas Gerais.

You can find out more information about our work on the Cochrane Brasil website: brazil.cocohrane.org.

Kind regards,

**Name**
Director
Cochrane Brasil Amazon
An Affiliate of Cochrane Brasil

**Trusted evidence.
Informed decisions.
Better health.**

**brazil.cochrane.org**

Funding statement Funding statement Funding statement Funding statement Funding statement

Left: Cochrane Brazil Amazon's email signature
Right: Cochrane Brazil Amazon's letterhead

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/
resources/resources-groups/brand-resources**

# Cochrane Transformation Programme: Review Group Networks

In August 2017, Cochrane published the CRG Transformation Programme implementation plan which sets out the changes we will be making to ensure Cochrane addresses the challenges it faces in relation to the production of a comprehensive collection of timely, high-quality reviews, relevant to our stakeholders. In order to meet Cochrane's future evidence needs was a structural change to bring all Cochrane Review Groups (CRGs) together into 'Networks'.

Each of the new Review Group Networks will be led by a Senior Editor; and these Senior Editors, together with the EiC, the Deputy EiC, an end-user of the Library, and experts in methods and Knowledge Translation, will constitute Cochrane's Editorial Board.

## How will the Review Group Networks operate?

We wish to create vibrant and robust Networks of sustainable, nimble, and connected CRGs. The CRGs within a Review Group Network must comprehensively cover all healthcare topics relevant to them (and together, all the Networks will then cover all healthcare topics).

The eight Review Group Networks will:

- be larger, more sustainable units; bringing CRGs together around recognizable themes. Themes that will be better understood by all our stakeholders;

- work together more effectively; sharing resources and projects, quality assurance, new methods, and prioritization;

- work on delivering *Strategy to 2020.*

## How will the CRGs operate differently?

Review Group Networks provide an opportunity to optimize leadership and support at a new level within the organization.

The CRGs as part of their new Network will develop and begin implementation of a work plan that:

- ensures that review quality and editorial processes are consistent across the Network;

- evaluates topic coverage at the Network level and identifies important gaps;

- identifies review topic priorities at both the Network and CRG levels;

- identifies Network-specific developmental priorities (for example, for training or a methodological development);

- seeks to optimize communication between Networks and the Cochrane community;

- considers Knowledge Translation (KT) and outreach activities at the Network level.

**Coordinating Review Group Network**


Cochrane Acute and Emergency Care

**Review Groups**


Cochrane Acute Respiratory Infections


Cochrane Bone, Joint and Muscle Trauma


Cochrane Anaesthesia


Cochrane Injuries


Cochrane Critical and Emergency Care

Cochrane
Acute and Emergency Care

**Coordinating Review Group Network**

Cochrane
Brain, Nerves and Mind

**Review Groups**

Cochrane
Common Mental Disorders

Cochrane
Multiple Sclerosis and Rare Diseases of the CNS

Cochrane
Dementia and Cognitive Improvement

Cochrane
Neuromuscular

Cochrane
Drugs and Alcohol

Cochrane
Schizophrenia

Cochrane
Epilepsy

Cochrane
Tobacco Addiction

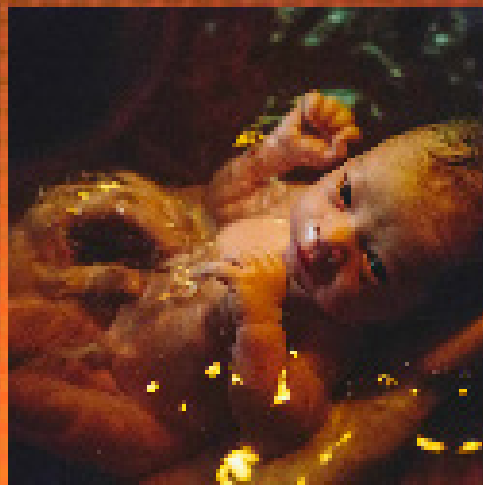Cochrane
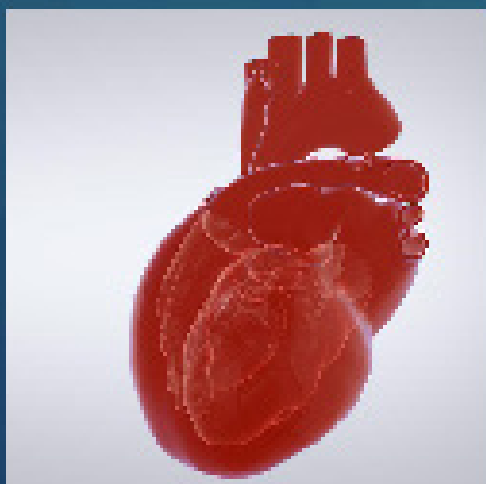Movement Disorders
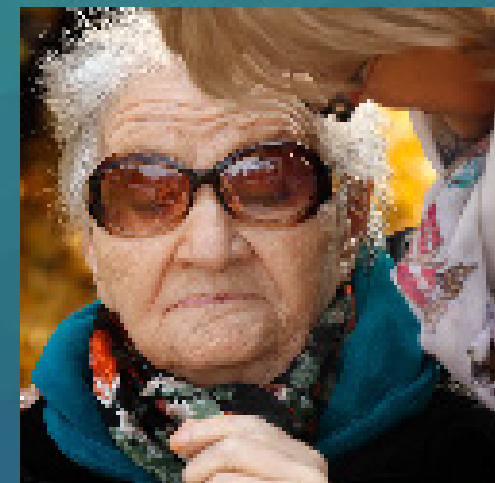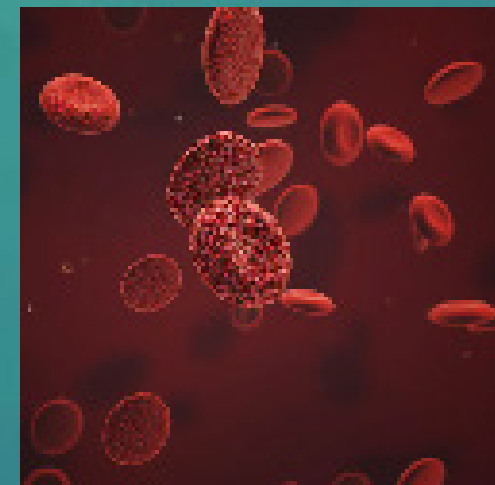
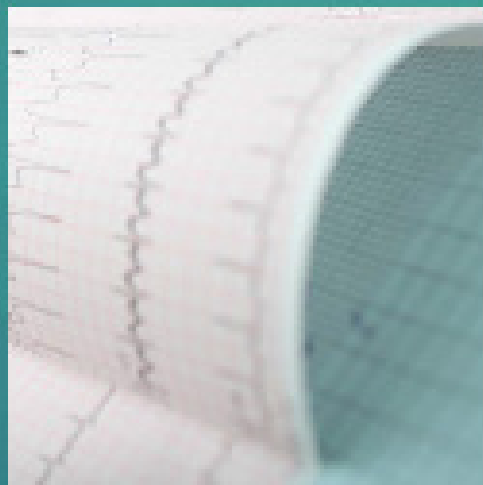Cochrane
Brain, Nerves and Mind

**Coordinating Review Group Network**



**Review Groups**

**Coordinating Review Group Network**



**Review Groups**

Cochrane
Children and Families

**Coordinating Review Group Network**



**Review Groups**

Cochrane
Circulation and Breathing

## Coordinating Review Group Network 1


Cochrane Long Term Conditions and Ageing

## Coordinating Review Group Network 2


Cochrane Long Term Conditions and Ageing

### Review Groups

Cochrane Hepato-Biliary

Cochrane IBD

Cochrane Kidney and Transplant

Cochrane Metabolic and Endocrine Disorders

Cochrane Upper GI and Pancreatic Diseases

### Review Groups

Cochrane Back and Neck

Cochrane ENT

Cochrane Eyes and Vision

Cochrane Oral Health

Cochrane Pain, Palliative and Supportive Care

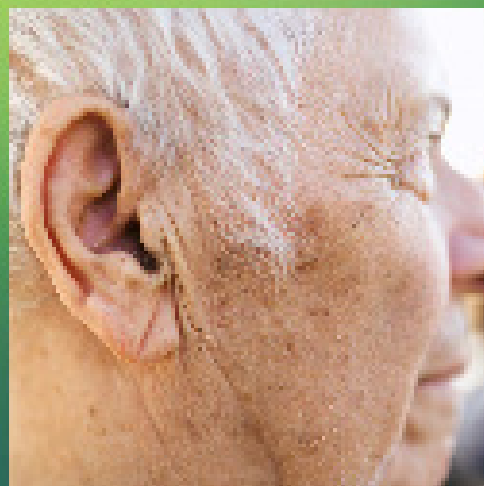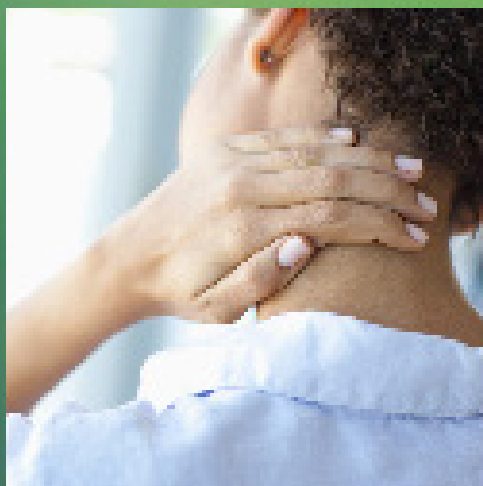Cochrane Skin

Cochrane Wounds

Cochrane
Long Term Conditions
and Ageing

**Coordinating Review Group Network**



**Review Groups**

Cochrane
Public Health and
Health Systems

Review Group Networks and Review Groups operate under a clear, manageable, and meaningful accountability structure.



**Key**

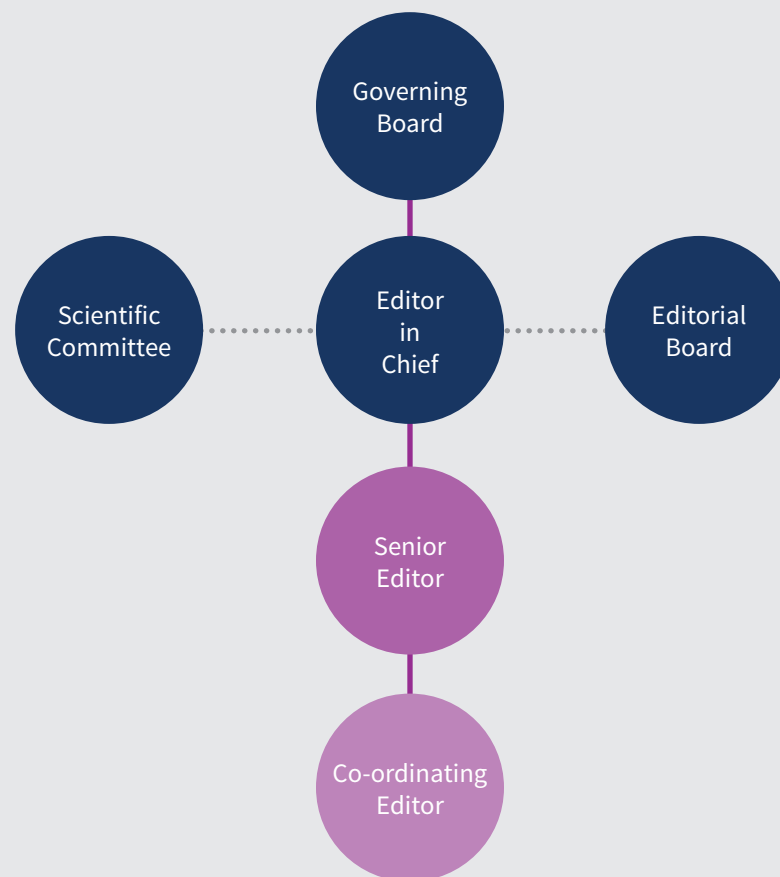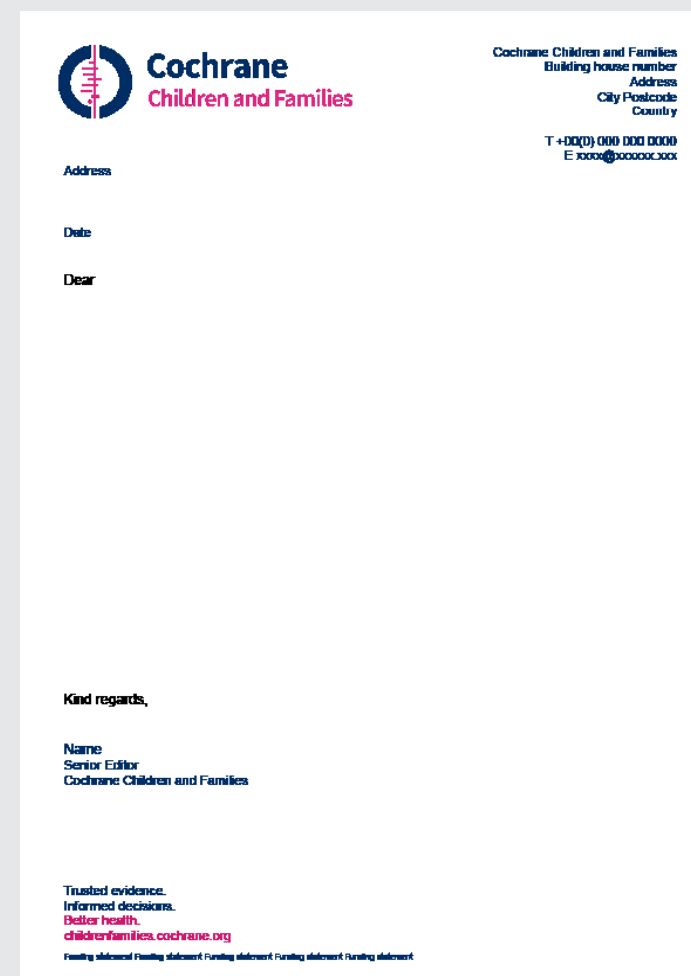— Formal governance/management relationship

····· Advisory relationship

| | Review Group | Review Group Network |
|---|---|---|
| **Brand colour** | Choice of colour | n/a |
| **Logo** | Review Group logo | Review Group Network logo and all Review Group logos within the Network |
| **Website** | One per Review Group | One per Review Group Network with a link out to each Review Group website |
| **Social media channels** | One channel type per Review Group | One channel type per Review Group Network |
| **How you can describe yourself** | Cochrane [Group topic]<br>or<br>Cochrane [Group topic] Review Group<br>or<br>Cochrane [Group topic], part of the Cochrane [Network topic] CRG Network | Cochrane [Network topic] |
| **Archie** | In Archie as a subgroup of the relevant CRG Network | In Archie as a parent group with all relevant Review Groups listed a subgroups |
| **Benefits** | Cochrane Library publishing rights and one free registration to the Colloquium | One free registration to the Colloquium |

**Review Group Network template examples**



Name
Senior Editor
Cochrane Children and Families

Cochrane
Children and Families

E email@cochrane.org   T +44(0) 000 000 0000   M +44(0) 000 000 0000   S skypename
Address
childrenfamilies.cochrane.org

Trusted evidence. Informed decisions. Better health.



Cochrane
Children and Families

Cochrane Children and Families
Building house number
Address
City Postcode
Country

T +00(0) 000 000 0000
E xxxxx@xxxxxxx.xxx

Address

Date

Dear

Kind regards,

Name
Senior Editor
Cochrane Children and Families

Trusted evidence.
Informed decisions.
Better health.
childrenfamilies.cochrane.org
Funding statement Funding statement Funding statement Funding statement Funding statement

Left: Cochrane Children and Families' email signature
Right: Cochrane Children and Families' letterhead

Download templates and 'How to' guides from
**community.cochrane.org/organizational-info/resources/resources-groups/brand-resources**

# Thank you

Thank you for reading these guidelines. Your participation will help us present a unified look and feel that will work effectively in a digital world, and make it easier for external audiences to understand what Cochrane is all about.

If you require further information about Cochrane's brand or have any questions about these guidelines, please contact the Knowledge Translation Department.

May 2020

St Albans House
57–59 Haymarket
London  SW1