

## Continuing Education Writing: Know Your Clinician Audience

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### ABSTRACT

Continuing education (CE) writing is a major field of work for medical writers and editors. To effectively write and edit CE materials, medical writers need to understand the target clinician audience, including clinical responsibilities. Physicians, nurse practitioners, physician assistants, pharmacists, nurses, clinical psychologists, and dietitians are examples of professions that often require CE to maintain licensure. With a general trend of increased funding for CE programs, medical writers and editors have opportunities to be involved in crafting deliverables such as needs assessments and other portions of grant proposals as well as various types of deliverables for educational content.

Despite the trust that should be inherent in receiving health care, how do we know those providing it are competent? We hope that the system in place helps these clinicians establish a standard of excellence based on licensing requirements. However, measures of clinician competence in clinical, cognitive, and communication skills were historically measured only at initial licensure.<sup>1</sup> In an effort to keep clinicians competent and updated on advancements in their field, licensing requirements for many health professions mandate continuing education (CE) to maintain knowledge of ongoing changes. From a logical and practical perspective, requiring CE—and in some cases recurring certification exams—is a necessary measure because of the rapid rate of ongoing change in medicine. This article reviews key considerations and practical tips for how medical writers can better understand our clinician audience and develop more targeted materials.

CE for health care professionals is sometimes (and often interchangeably) referred to as CME (continuing medical education). CME, however, refers specifically to CE for physicians. According to The Accreditation Council for Continuing Medical Education (ACCME), which sets the standards for accredited CME, “Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance

and relationships that a physician uses to provide services for patients, the public, or the profession.”<sup>2</sup> This definition can be adapted and applied to other health care professions. For the purposes of this article, we will use CE to refer to the educational activities of all health care professions, inclusive of CME and physician education.

In addition to the ACCME, CE accreditation bodies exist for other professions, aside from physicians:

- The American Association of Nurse Practitioners (AANP)
- The American Academy of Physician Associates (AAPA)
- The Accreditation Council for Pharmacy Education (ACPE)
- The American Nurses Credentialing Center (ANCC)
- The National Board for Certified Counselors (NBCC)
- The Accreditation Council for Education in Nutrition and Dietetics (ACEND)
- The Joint Accreditation for Interprofessional Continuing Education

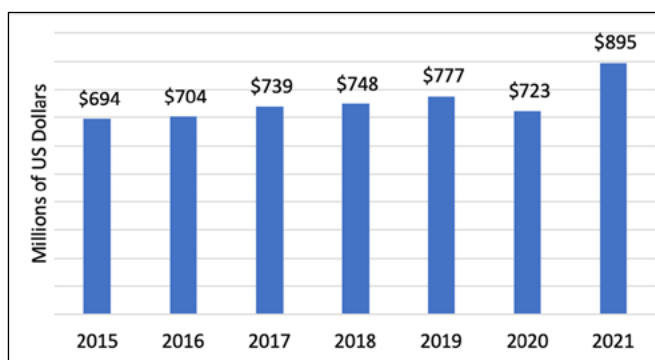
Many medical writers and editors belong to certain groups of health care professionals. However, many medical writers also have nonclinical backgrounds such as basic science, communication, and journalism. Regardless of clinical background, medical writers may be asked to write educational content. This article is intended to give clinicians and nonclinicians alike an overview of how to tailor content to different clinical audiences.

With multiple health care professions requiring CE, medical writers often have opportunities to craft educational content for accredited activities. Some educational content that medical writers are asked to work on may also be nonaccredited. Whether accredited or not, we need to know how to adapt the content to address the needs of the target clinician audience.

### THE MARKET FOR CE WRITING

Starting in 2006 and throughout subsequent years, the CE industry went through significant changes, including adjust-

ments to methods, funding, and objectives.<sup>3</sup> Some professionals thought that CE would no longer exist. However, by 2012, the industry had settled into a sustainable trajectory. The industry continues to grow, with an increasing trend for income reported by CE providers from commercial support in the United States each year, apart from a setback in 2020 likely caused by the COVID-19 pandemic (Figure). This means continued opportunities for medical writers to capture a share of that funding because content creation is at the core of educational programs. Additionally, medical writers may compose needs assessments and other portions of grant proposals.



**Figure.** Total yearly income from commercial support reported by accredited US educational providers, years 2015-2021.<sup>4</sup>

Notably, commercial support of CE activities in 2021 accounted for 32% of reported yearly income by accredited US educational providers. In 2021, there were an estimated 28 million learner interactions, about 75% of which were physician interactions.<sup>4</sup>

Because many health care professions are required to maintain a set number of educational hours each year (Table 1), CE is not going away in the foreseeable future. Despite a large share of the market dedicated to physician education, medical writers will still be asked to create content for other clinicians. Given differences in their scope of practice, writing content for other health care professionals (eg, pharmacists, nurses) is not always the same as writing content for physicians. Additionally, physician audiences may have different specialties. For example, writing content for primary care practitioners about dementia would need a different approach than writing content for neurologists about dementia.

Interprofessional education writing often needs a unique approach as well. Interprofessional education initiatives may be focused more on concepts like communication and collaboration among team members rather than detailed medical or scientific content.

**Table 1.** Number of Education Hours Required by Select Health Care Professions<sup>5-11</sup>

Profession	Average Minimum Required Education Hours Per Year
Physician (MD, DO, MBBS) <sup>a</sup>	12-50
Nurse Practitioner (NP) <sup>b</sup>	20
Physician Assistant (PA)	50
Pharmacist (RPh, PharmD) <sup>a</sup>	12-20
Nurse (LPN, RN) <sup>a,b,c</sup>	0-15
Clinical Psychologist <sup>a</sup>	6-20
Registered Dietitian (RD) <sup>a</sup>	10-15

DO, Doctor of Osteopathic Medicine; LPN, Licensed Practical Nurse; MBBS, Bachelor of Medicine, Bachelor of Surgery; MD, Doctor of Medicine; PharmD, Doctor of Pharmacy; RN, Registered Nurse; RPh, Registered Pharmacist.

<sup>a</sup>Exact number of education hours is determined by state of licensure

<sup>b</sup>Some designations may recertify by examination, which may not require CE credits

<sup>c</sup>Many states have practice hours as an additional or alternative requirement to CE credits

## HOW TO WRITE EDUCATIONAL CONTENT FOR DIFFERENT HEALTH PROFESSIONS

The foundation for understanding your clinician audience is knowing their scope of practice and role in the health care team (Table 2). For example, a nurse practitioner (NP) has a very different role than a registered nurse (RN). An educational program for RNs should not include a learning objective for prescribing treatments or making a diagnosis. However, topics covering monitoring vital signs and symptoms or medication administration would be reasonable for learning objectives for this audience.

The company you are working with to develop CE content will likely determine the target audience based on educational needs and supporter interest. The audience determines how you approach all deliverables you might be working on. This includes needs assessments for grant proposals and the educational content. As an example, if the education company or institution provides education exclusively to pharmacists, you should not identify educational gaps for physicians for the needs assessment.

If you are unsure about the specific role of the target audience within the health care system, always ask. Sometimes, your client or employer may be relying on you to determine this. In many cases, you can consult with a key opinion leader in the profession if you need more information. The American Medical Writers Association (AMWA) community is also a great resource with many clinician writers, so feel free to phone a friend!

Medical writers and editors who are familiar with creating CE content should only need to implement small tweaks in the approach to content creation. Much of the material

**Table 2.** General Responsibilities of Select Health Care Professionals<sup>12-19</sup>

Profession	Responsibilities
Physician (MD, DO, MBBS)	<ul style="list-style-type: none"><li>• Screen for, diagnose, and treat injury or illness</li><li>• Perform physical examinations; take medical histories; order, conduct, and interpret medical tests</li><li>• Counsel patients on preventative health care and healthy lifestyle practices</li><li>• Conduct surgeries and procedure</li></ul>
Nurse Practitioner (NP)	<ul style="list-style-type: none"><li>• Similar responsibilities as physicians</li><li>• In many states, NPs can practice independently</li><li>• In some states, NPs must practice under a physician's supervision</li></ul>
Physician Assistant (PA)	<ul style="list-style-type: none"><li>• Similar responsibilities as physicians</li><li>• Must practice under a physician's supervision</li></ul>
Pharmacist (RPh, PharmD)	<ul style="list-style-type: none"><li>• Offer expertise in the safe and effective use of medications</li><li>• Fill and dispense prescription orders, verifying instructions from prescribers</li><li>• Educate patients about their medications, disease states, and healthy lifestyle practices</li><li>• Administer vaccines</li><li>• In some states, pharmacists can prescribe medications under a physician's supervision</li></ul>
Nurse (LPN, RN)	<ul style="list-style-type: none"><li>• Provide and coordinate patient care, including conducting health assessments, medical histories, and monitoring vital signs and symptoms</li><li>• Administer medications, vaccines, and medical devices and other treatments ordered by a prescriber</li><li>• Operate medical equipment</li><li>• Conduct patient education regarding their disease state, healthy lifestyles, and physician's instructions</li></ul>
Medical Assistant (MA)	<ul style="list-style-type: none"><li>• Measure and record vital signs and other patient information</li><li>• Assist nurses and medical practitioners with their responsibilities</li><li>• Administer vaccines</li><li>• Schedule patient appointments</li></ul>
Clinical Social Worker	<ul style="list-style-type: none"><li>• Assist with diagnosis, treatment, and management of behavioral, mental, and emotional disorders</li><li>• Provide therapy for individuals and groups</li><li>• Help individuals develop and implement strategies to cope with situations or change behavior</li></ul>
Clinical Psychologist	<ul style="list-style-type: none"><li>• Screen for, diagnose, and treat behavioral, mental, and emotional disorders</li><li>• Interview patients, administer diagnostic tests, provide psychotherapy to individuals and groups</li><li>• Can prescribe medications in some states</li></ul>
Registered Dietitian (RD)	<ul style="list-style-type: none"><li>• Provide expertise in the use of food and nutrition to manage disease and promote health</li><li>• Assess patients' nutrition needs, develop and monitor meal plans, and collaborate with the care team</li></ul>

DO, Doctor of Osteopathic Medicine; LPN, Licensed Practical Nurse; MBBS, Bachelor of Medicine, Bachelor of Surgery; MD, Doctor of Medicine; PharmD, Doctor of Pharmacy; RN, Registered Nurse; RPh, Registered Pharmacist.

will be similar, but your target audience will dictate where you dive deep into the details for a given CE program.

### CASE STUDY - MULTIDISCIPLINARY ONCOLOGY PROGRAM

For this case study, assume that you are working with a medical education company to develop content for a multidisciplinary oncology program on non-small cell lung cancer (NSCLC). Within an oncology practice, health care professionals likely include physicians, NPs and PAs, pharmacists, nurses, and other support staff.

Imagine that the education company would like you to create several PowerPoint slides to educate each group—physicians, midlevel practitioners (NPs, PAs), pharmacists, nurses, and other support staff. The program has 4 learning objectives:

1. Describe the role of molecular testing in diagnosis and disease classification for NSCLC.
2. Apply best practices for selecting targeted therapies

for NSCLC based on genetic alterations and immune checkpoint targets.

3. Manage adverse events from NSCLC treatments.
4. Employ a multidisciplinary approach to providing education on the disease state and treatment plan for patients, their families, and caregivers.

As a first step to determining the content to create, you might consider which learning objectives are relevant to each group. For oncology physicians, all 4 learning objectives apply. They are involved in testing, diagnosis, and treatment of NSCLC as well as overseeing patient education and the entire patient experience. For NPs and PAs, all 4 learning objectives also apply. NPs and PAs can diagnose and treat disease under a physician's supervision (except for NPs in certain states, who do not need a supervising physician).

For pharmacists, learning objectives 2, 3, and 4 would be relevant. Pharmacists help with treatment selection, monitoring, and patient education in many settings. They

are generally less involved with initial testing and diagnosis. For nurses, objectives 3 and 4 would be relevant. Nurses might administer medications in the clinic, call patients to assess their response to treatment, handle any questions or concerns, and provide education. For other support staff, objective 4 would be relevant. Other employees in the clinic may not be directly involved in disease management, but they are still part of the multidisciplinary team. They help educate and support patients, their families, and caregivers throughout the treatment experience.

## CONCLUSION

CE writing (or CME writing) consists of conceptualizing, designing, and writing educational content for practicing health care professionals. This includes physicians, NPs, PAs, pharmacists, and nurses as well as others. Medical writers are often needed to draft needs assessments and other portions of grant proposals as well as various types of deliverables for educational content. When writing content, medical writers need to tailor the education to the target clinician audience. It is important to consider whether the program will be multidisciplinary or only focused on a specific profession. A working knowledge of the roles of clinicians on the health care team will help you create the right content for the target audience.

**Author declaration and disclosures:** *The author notes no commercial associations that may pose a conflict of interest in relation to this article.*

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