



Brand Guidelines

As of June 2024

ABOUT ACOFP

Founded in 1950, the American College of Osteopathic Family Physicians (ACOFP) is a community of 26,000 physicians, residents, and students that champions osteopathic principles and supports its members by providing resources such as education, networking and advocacy, while putting patients first.

ACOFP empowers its members with education and resources that allow them to adapt to new models of care and quickly changing government policy.

MISSION: ACOFP works to promote excellence in osteopathic family medicine through quality education, visionary leadership, and responsible advocacy.

VISION: The vision of the ACOFP is to be the professional home for all individuals with a commitment to osteopathic primary care.



ACOFP BRAND GUIDELINES

Welcome to the ACOFP Brand and Editorial Guidelines. As a leading voice in family medicine, the American College of Osteopathic Family Physicians (ACOFP) is committed to maintaining the highest standards of communication and professionalism. These guidelines are designed to ensure that all forms of communication—whether digital, print, or spoken—are consistent, accurate, and reflect the values and principles of ACOFP. By adhering to these standards, we support our members in providing exceptional care and uphold our reputation as a trusted resource in the medical community. This document serves as a comprehensive guide for our internal team, members, and partners, ensuring that every interaction and piece of content aligns with our mission and enhances our collective impact.

The following guidelines have been established to maintain a consistent brand standard in the implementation of all ACOFP materials, applications and collateral.

It includes guidelines for the use of the logo, programmatic logos, typography, color, imagery, and editorial style and should be and should be applied to all the visual communications produced for ACOFP and its members. The manual does not attempt to provide a set of rules for every conceivable application. Instead, it provides a guide that can be applied to any new/future applications.

Please refer to these guidelines whenever creating ACOFP materials.

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1 Design

THE LOGO

The logo features the preferred name of the association with the emphasis on “ACOFP” and the full name secondary in three lines to the right. The two are divided by a single line.

The logo should never be recreated. Only the provided logo files should be used.

PRIMARY LOGO

The horizontal format of the logo is used for primary use, shown to the right. It shows both abbreviations and the full name of the association.



SECONDARY LOGO

A secondary logo displaying “acofp” alone can also be used when the full identity is already apparent in the communication, for instance on the letterhead second sheet or as a thumbnail image (i.e. Facebook profile image).



LOGO ICON

An icon logo displaying only the “a” may be used for a favicon or app icon. This option is only available when the full “acofp” isn’t legible at the recommended pixel size.



LOGO VARIATIONS

To maintain the ACOFP brand integrity, the logo colors should never be altered, the mark should never be stretched or the logo elements shifted or reorganized. The typography should never be recreated in any way. Only the provided brand logo digital files should be used to represent the association.

MINIMUM LOGO SIZE

The logo should not be used smaller than the minimum sizes noted below.

The primary logo should not be reproduced at widths below 1.75 inches.

The secondary logo should not be reproduced at widths below 0.5 inches.



SPACING

It is important to have adequate amount of spacing around the logo for legibility. Refrain from having any text or other design elements within this space.

The primary and secondary logos should have a margin spacing of 0.25 inches or greater.



WEBSITE TAGLINE

One exception to the margin-spacing rule is adding the website to the secondary logo. As seen to the right, the website is nested underneath “acofp” within the 0.25 inch spacing.



BACKGROUND VARIATIONS

It is important to have an adequate contrast between the logo and the background for maximum clarity and logotype’s readability.

Use the examples on this page as a reference for the correct use on various backgrounds.

PRIMARY LOGO

When placing the logo on a background equal to 30% black or lighter, the logo should be positive. When placing the logo on a background darker than 30% black, it should reverse to white. Same rule applies for photographic backgrounds—the logo should be either positive or reversed to white to be easily readable. If the photo doesn’t provide a legible/contrasting background, a solid white or primary color block should be placed behind the logo for readability.

The color of the logo should either be PMS 5473 or one of the primary colors listed on page 11.

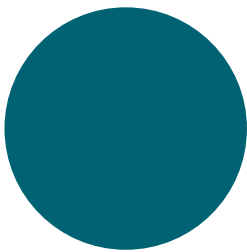
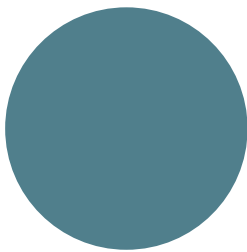
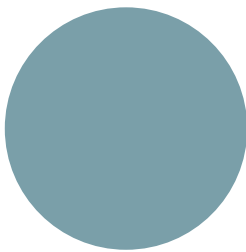
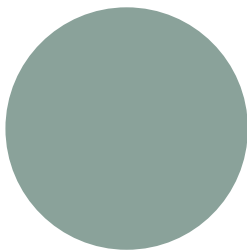
In addition to the color variations, the logo can be displayed at 70%, 50% or 30% black. This color variation will be used on white/lighter backgrounds.



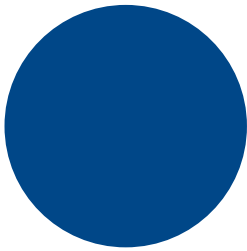
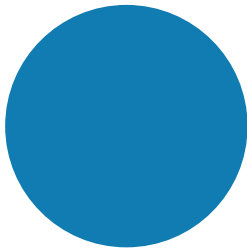
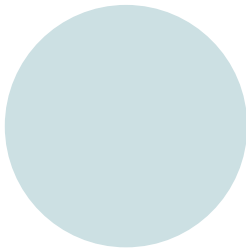
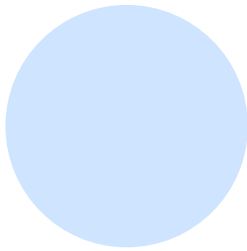
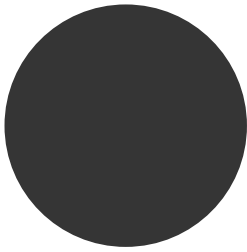
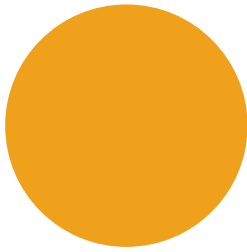
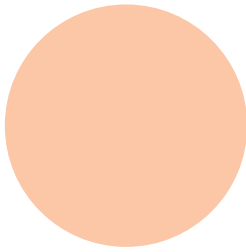

COLOR SCHEME

The ACOFP website was designed to highlight the organization’s branding, with a rich palette of blues and greens. Additional accent colors were added to increase the vibrancy and provide contrast.

MAIN BRAND COLORS

			
Teal #006272	Teal 80% #507F8C	Teal 60% #7A9FA9	Sage #8AA29A

ACCENT COLORS

			
#004788 100, 81, 19, 2	#107CB2 92, 46, 6, 0	#CCE0E3 26, 6, 13, 01	#CFE5FF 21, 8, 0, 0
			
#353535 72, 66, 65, 46	F0A11C 2, 39, 100, 10	#FBC7A7 0, 29, 36, 2	#F3F3F3 9, 6, 7, 0

AUDIENCE-SPECIFIC COLORS

		
Med Students #9C0E54	Residents #003655	Educators #2F3887

TYPEFACES

All content in the ACOFP website is carefully styled using two typefaces, Gotham and Open Sans, in a variety of weights and colors. These variations are not only visually appealing, but they also create hierarchy, making it easier to read content.

GOTHAM STYLES:

Gotham Black

Gotham Bold

Gotham Medium

Gotham Book

Gotham Light

OPEN SANS STYLES:

Open Sans Extra Bold

Open Sans Bold

Open Sans Regular

Open Sans Light

EMAIL TEMPLATES

Due to limited font availability, use the Arial font-family as the heading and body when creating email templates.

Heading Arial Bold (14pt)

Body Arial Regular (12pt)

TAGLINE

The tagline “advocacy, education, leadership” should be typeset in the Gotham Book font only and displayed outside the margin spacing (page 9). The tagline is on one line, centered below the full logo.

See examples below for approved formats and placement.

SIZE

When displaying a small logo, remove the tagline as legibility will be difficult at a smaller scale.

COLOR

The tagline color should be either PMS 5473 (green) or PMS 5395 (blue), (page 11). To make the tagline more noticeable, the logo should be a contrasting color, either 50% or 30% black.

WEBSITE

The website can be considered a tagline when different logo versions are used and/or for marketing purposes. Website URL is to be centered below the full name of the association, not the full logo. Use the examples on the right for preferred website placement.



STATE SOCIETIES

For those states societies that do not have their own logo, use the below guidelines and examples.

FONTS & LAYOUT

To keep the brand recognition, all State Society logos will have the same fonts and layout design as the ACOFP logo.

State logos will display the “acofp” to the left and the specific state to the right.

A dividing line is displayed between the two, mirroring the layout of the ACOFP logo.

COLOR

To be slightly different than the ACOFP logo, display the State Society logos in the primary color PMS 5473.



PROGRAMMATIC LOGOS

The use of the ACOFP programmatic logos is a crucial aspect of our branding strategy, providing a visual representation of our identity and the diverse programs we offer to our members at all points throughout their careers; medical students, residents in training, new physicians-in-practice, tenured physicians, and those that practice in an academic setting.

These logos are designed to be instantly recognizable and are reserved for use in official communications, marketing materials, and other approved contexts to ensure brand integrity. It is essential that the logos are not altered in color, proportion, or design without explicit permission from our branding team.

Adhering to these standards reinforces the professionalism and unity of our brand, helping to maintain a cohesive image across all platforms and touchpoints.



THE STUDENT ASSOCIATION OF THE ACOFP

The Student Association of the ACOFP is made up of chapters from all of the colleges of osteopathic medicine (COM). They are a dynamic and supportive community designed for medical students interested in osteopathic family medicine.

The Student Association of the ACOFP is governed by the National Student Executive Board (NSEB) and include Chapter Leaders at each COM.

They offers numerous free resources to it's members, including mentorship opportunities, educational workshops, and access to the latest research and developments in family medicine. Through active involvement in the Student Association of the ACOFP, students gain valuable insights and experiences that prepare them for successful careers as compassionate, competent, and committed osteopathic family physicians.

OBJECTIVES OF THE STUDENT ASSOCIATION OF THE ACOFP:

- Advance the standards of family medicine in osteopathic medicine by enhancing educational opportunities for training family physicians.
- Encourage the establishment and expansion of family medicine residency programs within hospitals
- Promote a comprehensive understanding of the services provided by family physicians and their relationship to other specialty groups
- Uphold high moral and ethical standards in the practice of osteopathic medicine.



THE AUXILIARY TO THE ACOFP: Supporting Families and Future Physicians

No one gets by on their own—especially during osteopathic medical school and residency. That’s why the Auxiliary to the ACOFP was established. Spouses and significant others of osteopathic physicians have united with a mission to support families and those beginning their journey in family medicine.



MISSION

The mission of the Auxiliary to the American College of Osteopathic Family Physicians (AACOFP) is to promote and support the ACOFP by enhancing engagement among families, students, and residents. Through these efforts, we aim to foster a sense of belonging within the Osteopathic Family Medicine Community.

GOALS

- **Engage with and Support Families:** Connect with and support the families of ACOFP members to create a strong, supportive network.
- **Support Future Leaders:** Provide resources and support to the future leaders of osteopathic family medicine.
- **Recognize and Develop Professionals:** Recognize and support the professional development of students and residents.
- **Collaborate with ACOFP:** Explore additional partnership opportunities that align with the missions of both the ACOFP and the AACOFP.



2 Convention Guidelines

CONVENTION LOGO

The ACOFP convention logo stands as a timeless emblem of our annual gathering, its design remaining constant to symbolize the enduring values and ongoing legacy of our organization. While the logo's structure is fixed, it is brought to life anew each year through a dynamic change in color palette, thoughtfully chosen to reflect the unique character of the convention's host location.

This annual refresh of color not only distinguishes each year's event but also pays homage to the diverse landscapes and communities where family physicians practice. By adapting the hues of our logo to the spirit of the locale, we celebrate the rich variety within our professional family and the different regions we serve, fostering a sense of anticipation and local flavor for the upcoming convention.

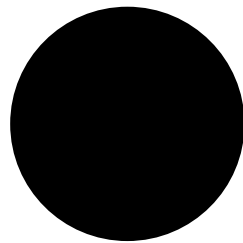


COLOR SCHEME

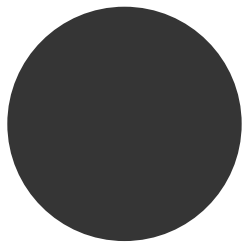
The majority of colors used in the ACOFP convention microsite are neutral shades of grays, blues, and greens; this will allow the current year’s convention branding to shine, no matter what the color scheme might be.

In select areas, richer and bolder accent colors are used; these correlate to color coding of audiences on the main ACOFP site, or draw the user’s eye to clickable areas.

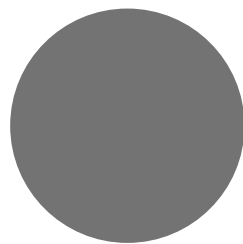
MAIN COLORS



Black
#000000



Graphite
#353535

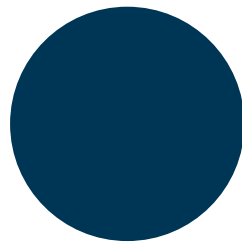


Medium Grey
#737373

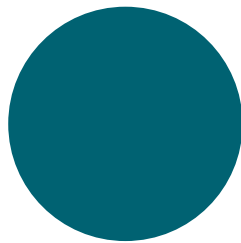


Pale Grey
#F3F3F3

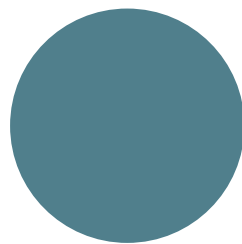
BRAND COLORS



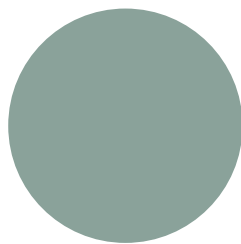
Navy
#003655



Teal
#006272

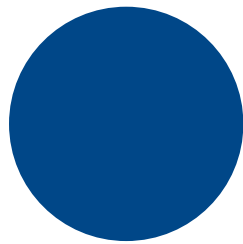


Teal 80%
#507F8C

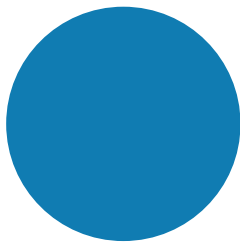


Sage
#8AA29A

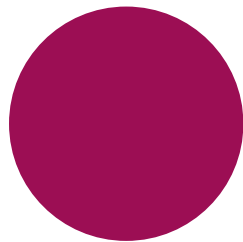
ACCENT COLORS



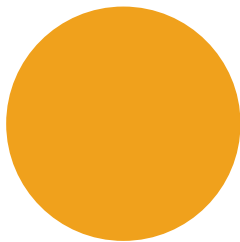
Intense Navy
#003655



Light Blue
#107CB2



Magenta
#9C0E54



Gold
#F0A11C

CONVENTION FONTS

GOTHAM STYLES:

Gotham Black

Gotham Bold

Gotham Medium

Gotham Book

Gotham Light

CALIBRI STYLES:

Calibri Bold

Calibri Regular

Calibri Light





3 Products & Services

PRODUCTS & SERVICES

Logos are FOR PLACEMENT ONLY

OMTotal



OMTeaching



eLearning Center



OFP Journal



In-Service Exam



ISE

Cortex



CORTE_x
CLINICAL OSTEOPATHIC RECOGNITION TRAINING EXAM



4 Lifestyle Images

IMAGES

In our communications, we prioritize utilizing images of our membership, however when that is not possible, we select lifestyle images that authentically represent the diverse community of family physicians, patients, and healthcare settings we serve.

These images should evoke a sense of warmth, professionalism, and trust, showcasing real-world scenarios that reflect the daily practices and patient interactions of our members.

It is important that these photographs are inclusive, featuring a variety of demographics including age, race, gender, and cultural backgrounds. The settings should be realistic and relevant to osteopathic family medicine, such as hospital practice setting, rural clinic, academic, or military base. By carefully selecting images that resonate with our values, we reinforce our commitment to holistic, patient-centered healthcare.







5 Editorial Style

EDITORIAL STYLE

ACOFP’s organizational tone is professional, but friendly. Our objective is to make readers feel like ACOFP is their professional family. We value writing the way we speak.

ACOFP follows AP Style.

ACOFP-SPECIFIC TERMS

- Board of Governors
- Annual convention (not meeting or conference), session (not lecture or section),
the name of the event is ACOFP ’24
- Don’t use “new physician.” Use “new physician-in-practice” (note the hyphens)
- Use a hyphen in terms like “OMS-III”
- When possible, use medical student or med student instead of just “student”

We use “we” and “you” rather than third-person language like “members.”

Some of the adjectives we want to embody are kind, considerate, thoughtful, approachable, and inclusive. We strive to be clear and straightforward, and meet people where they’re at.

REFERRING TO PEOPLE

Dr. Emily Jones

Or

Emily Jones, DO, FACOFP *dist.*

NOT

Dr. Emily Jones, DO, FACOFP *dist.*

Residents use the “Dr.” title.

Students may be referred to as Student Doctor Emily Jones or by name alone.

When creating a byline or signature, include DO or MD and any other terminal degrees. Degrees that were prerequisites for the person’s highest degree are not included. For example, a physician’s byline should not list their BS or MS degree. However, if they have a PhD in another field, that may be listed alongside their DO or MD degree.

SPELLING, PUNCTUATION, AND STYLE

Acronyms: Spell out acronyms on first mention on a page or in a blurb unless they are very familiar to our audience. For example, spell out EEIC or AAFP. You do not need to spell out very familiar acronyms like CME or OMT.

Spell out the names of other organizations, such as partners or competitors, on first occurrence on any given page, email, etc., even if you think the reader will know the acronym.

Do not use “the” in front of an abbreviation, such as “the ACOFP.” It’s just, “ACOFP.”

Best practices for the web and email: Avoid using “click here.” Embed links rather than putting the full link in the text of the page or use a call to action like, “Learn more” or “Read here.”

Capitalization: In headings, use headline or title case “The Cat in the Hat,” rather than sentence style “The cat in the hat.”

Numbers: Spell out numbers zero through nine. Use numerals for numbers 10 and greater. If a sentence begins with a number, spell it out: “Fourteen doctors were at the webinar.”

Phone numbers: Use the format 708-777-1038

Times and dates: Use a.m. and p.m. (lowercase, with periods): 7:10 a.m. Spell out months and days of the week: Monday, October 9.

Emphasis: When you want to emphasize certain information, use bold type. Do not use underline, and do not use italics or quotation marks for emphasis. Do not make fonts bigger except when using established heading styles.

Periods:

- Use one space after a period between sentences. Not two or more.
- Periods and commas always go inside quotation marks.
- Use periods with e.g. and i.e.

Punctuation: In lists using commas, include a comma after each item in the list (the “Oxford” or serial comma).

Red, white, and blue

NOT

Red, white and blue

Bulleted lists: Start each bullet with a capital letter and end with a period or other punctuation

PEOPLE-FIRST AND INCLUSIVE LANGUAGE

As an association, we prefer to use people-first language to prioritize the whole person and not their status with a disease or condition. Some people do prefer to identify with their condition (e.g., deaf students or an autistic woman), but unless we can ask the person(s) about their preference, we will default to people-first language when possible. In general, we want to be mindful of using language that pities people and recognize that some may not consider themselves to have a disability despite a certain diagnosis. This section highlights some of the common themes we deal with on a regular basis, but more detailed guidance is available through the AP Stylebook and the resources listed below.

AGE

- AP style prefers older adult(s) or older person/people instead of senior citizens or elderly.
- Be specific with ages whenever possible, particularly when reviewing articles.

DISABILITY

- From the National Center on Disability and Journalism: Remember that disability and people with disabilities are not monolithic, so avoid referring to “the disabled.”
- From AP Stylebook: Disabled is a general term for physical, mental, developmental, or intellectual disability. Do not use handicapped. “Disabled people” is an acceptable phrase, but we prefer to use “people with disabilities” when possible.

- Avoid terminology such as “afflicted with,” “battling,” or “suffers from” any disability or illness, or that a person “overcame” her disability. Instead, use has whenever possible: has cancer, being treated for this condition, etc. We have used “living with” occasionally, but AP recommends avoiding this phrasing unless a person uses it themselves.
- Avoid cliches that imply pity, such as describing the person as inspiring or brave for having a certain condition.
- Avoid “confined to a wheelchair” and “wheelchair-bound.” Use “wheelchair user.”
- Special Olympics prefers the term “Special Olympics athletes” to “Special Olympians,” but AP allows that terminology and we have used that terminology in the past.
- Instead of “homebound older adults,” be specific. For example, “older adults who reported rarely or never leaving home over the course of a month.”

DISABILITY (CONT)

- Most often for named diseases, we omit the possessive. It’s considered more people-first language. So, it’s Parkinson disease, and PD on subsequent references. There is an exception for Alzheimer’s disease, because the possessive is so prevalent. And whenever there’s an alternate name, like ALS instead of Lou Gehrig’s disease, we use that.
- “Participants” is preferable to “subjects” when referring to people involved in research. Some find “subject” to be impersonal and objectifying. This is in line with both AMA and PTJ style.

RACIAL AND ETHNIC GROUPS

- Instead of “racial and ethnic minorities made up...” say “people from racial and ethnic minorities made up...” The first is a category, the second is a group of people.
- “Minority” or “racial minority” are acceptable in broad references to non-white races in the U.S.—however, be specific whenever possible.
- Use minority students or minority groups instead of using minority as a single noun whenever possible.
- No hyphens in expressions denoting racial or ethnic identities (e.g., African American, Asian American).
- Black is capitalized, white is not.

SEXUAL ORIENTATION AND GENDER IDENTITY

- We generally use male and female as adjectives, but there are instances where it is appropriate to use them as nouns.
Example: The study included males ages 10-21 ...
- When describing women as professionals, consider if we would use the same language or terminology to describe a man.
Example of language we changed: Having graduated in 2018, Hannawi embodies a strong woman in business and in life ...
- Although using phrases such as “pregnant people” or “postpartum patients” is more inclusive language (and acceptable under both AP and NIH styles), legislative text often refers to pregnant women and mothers, so we will do so as well for consistency. (Note: Best practice related to this terminology may change in the future.)

WEIGHT

- From the NIH: “Overweight is a defined medical condition according to body mass index, commonly known as BMI. It may be used as either a noun or an adjective in person-first language. For example, both people with overweight and people who are overweight are acceptable; overweight people is not acceptable. Use person with obesity, person affected by obesity, or person who has obesity instead of obese person or they are obese. Obesity should always be referred to as a disease, not as a condition.”

FAMILIAR ACRONYMS THAT DO NOT NEED TO BE SPELLED OUT ON FIRST OCCURRENCE:

OMT CME DEI EHR ACOFP