Universal Symbols in Health Care

Developing a Symbols-Based Wayfinding System: Implementation Guidebook

Part 2: Destination Criteria and Referent Naming

Produced by Hablamos Juntos

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PART 2: Destination Hierarchy and Referent Naming

During the early planning stages in the wayfinding process, it is important to link the development of symbols to the referents (destination names) they will represent. Creating a hierarchy of destinations guides the development and application of symbols. While all health care facilities are different, they generally share similar destination hierarchy structures:

- **Hospital or System Identification** - The top of the hierarchy is the facility’s brand identity, which can be a combination of words and symbols. It is often incorporated into every wayfinding and identification element in the facility.

- **Building, Zone, or Section Identification** - Health care facilities are often divided into building zones and sections that contain multiple destinations. Graphic systems describing these areas often include colors, numbers, letters, names, or unique symbols.

- **Primary Destinations** - Major destinations often relate to specific functions and services in a health care facility and are the best candidates for health care symbols.

- **Support Destinations** - These secondary destinations, such as restrooms and cafeterias, are common to many large facilities. Ideally, the symbol sets depicting support destinations are common among health care facilities.

- **Room and Floor Addresses** - Underlying all destination systems in a health care facility are room and floor addresses that can be designated using a combination of names, letters, and numbers.

Different types of health care facilities have different approaches to hierarchies. For example, in-patient facilities often must integrate room addresses into the overall destination hierarchy, while clinics may be built around a small set of destinations. Health care campuses and multi-floor facilities also have unique destinations, including separate buildings and zones that are incorporated into the hierarchy.
• **Number of Symbols** - Research at the four Innovator sites showed that hospital visitors have difficulty telling symbols apart when one set contains more than 16 unique symbols. Establishing a strong destination hierarchy keeps the number of symbols manageable by grouping them by building, zone, or floor.

• **Symbol/Destination Names** - Most health care facilities desire flexibility when developing destination names for their facility. There are often political and cultural reasons behind the naming of destinations, including linking names with the specialization of doctors or using names that reflect the role of the facility as a clinic or full-service hospital. Testing at the Innovator sites showed that multiple destination names can be associated with one symbol. Destination names were effective when they followed certain guidelines, including:

  ~ **A close visual link with the symbol** – For example, in testing the symbol for “Cardiology,” users were able to match heart imagery with the terms “Cardiology Department,” “Cardio-Pulmonary Services,” “Heart & Disease Disorders,” and “Cardiovascular Medicine.”

  ~ **A link between function and location** – Symbols generally refer to a health care function and can be linked to many types of locations as long as the function remains in the name. In testing, terms like “Unit,” “Center,” “Clinic,” “Department,” and “Services” worked well to indicate place as long as the function remained linked to the symbol. The opposite does not hold true. If the function and the symbol imagery are not visually linked, users will not make the connection easily.
• Grouping Destinations - Using multiple symbols for one destination is not encouraged, but using one umbrella symbol for multiple destination names can be successful.

• For example, the symbol for the function “Imaging” can serve as an umbrella for multiple imaging functions in one location, including radiology, mammography, and CAT Scan, even though there are individual symbols for these functions as well. Similarly, testing showed that symbols like “Billing Department” can be used effectively for all billing functions in a health care facility.

• Combining health care symbols with other universal symbols - Universal symbols used in transportation and for accessibility can also be part of a health care symbol set. When combining these symbols into one set, it is important to use color, shape, and style consistently unless there is a specific design strategy behind the differentiation.

The following case study illustrates how symbol color, shape, contrast, and size can be used to differentiate various functions or spaces in a health care facility.
Case Study: Destination Hierarchy and Referent Naming

Women & Infants Hospital

Women & Infants Hospital had experimented with symbols-based wayfinding before its facility renovation, and developed a plan linking health care symbols, building identity, and the room-numbering system.

Building Identification

The building is part of a large campus, so building identification was considered less necessary/prominent for the interior wayfinding system.

Building Zones and Floors

The facility’s two main sections, Main Building and South Pavilion, are marked with major gateways and directory signs at the main entrance. These identities are not as important for interior wayfinding.

Primary Destinations

Eight destinations in the Main Building and three in the South Pavilion are identified by health care symbols.

Support Destinations

Five destinations (including cafeteria, bank, and restrooms) are identified by circular symbols different from the square health care symbols.

Room Addresses

Room numbers and addresses appear as a subset to the primary destination areas on directional and destination signs.
**Destination Names**

In most cases, the hospital used the destination names assigned with the USHC symbols set. The most significant exception is Pediatrics. Because the facility is devoted to women’s health during delivery, the terminology was changed to focus on natal care. To ensure that this approach is well understood, the facility is adding explanatory handouts to its wayfinding program.

Symbols that represent separate levels in a destination hierarchy can be differentiated by color, shape, positive/negative contrast, or size.

At Women & Infants Hospital (left and top), symbols used for support destinations (i.e., restrooms, cafeteria) are a different shape than those used for medical departments.

At Children’s Mercy Hospital (bottom), symbols for the emergency room hospital zones are different colors than the other symbols.
PART 2: Additional Resources

Attachment C: Universal Symbols in Health Care

Universal Symbols in Health Care presents the entire set of 50 health care symbols produced as a result of the Hablamos Juntos Phase I and Phase II research. Individual, reproduction-ready artwork in PDF and EPS formats is also available for each symbol. These files can be downloaded from Hablamos Juntos or SEGD.


A consortium of four universities researched and completed initial design work for new symbols added to the Universal Health Care Symbols set. Their work is documented in these two reports.

Testing Universal Symbols to Support Implementation in Health Care Facilities Signage

This report contains research from the symbol/destination matching tests.