

Accessibility Evaluation Report: McGraw Hill Access Medicine

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Conducted by: Accessiblü, LLC

For: Library Accessibility Network (LAA)

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Summary of the Access Medicine Accessibility Findings

Accessiblü conducted a high-level accessibility evaluation of the McGraw Hill Access Medicine platform to assess its usability for individuals with disabilities. This evaluation specifically addresses whether issues identified in a previous 2019 accessibility evaluation have been resolved, while also identifying any new concerns. The review was conducted using JAWS and NVDA screen readers, keyboard-only navigation, and manual inspection for conformance to select WCAG 2.2 AA success criteria.

Key Findings

While McGraw Hill has made some improvements since the 2019 evaluation, accessibility barriers remain that prevent users relying on assistive technologies from fully utilizing the platform. The most critical barriers include autoplay content that disrupts screen reader users, keyboard navigation issues, inadequate focus indication, improper ARIA implementation, and missing alternative text for important content.

Addressing these concerns would significantly improve the experience for persons with disabilities and users of assistive technology, providing them with more equitable access to the educational resources within Access Medicine.

Top 3 Issues Identified

1. Autoplay Content with No Controls

- Description: A carousel/video on the homepage autoplays and continuously announces journal covers to screen reader users without providing accessible controls to pause or stop playback.
- Impact: Screen reader users experience constant interruptions as the platform announces "Harrison's 21st edition cover,"
 "CMDT 2025 cover," and other content while trying to navigate the page.
- o WCAG Success Criteria: 1.4.2 Audio Control (A), 2.2.2 Pause, Stop, Hide (A)

2. Keyboard Navigation and Focus Issues

- o **Description:** Multiple interactive elements have poor focus management, with focus being lost or sent to unexpected locations, particularly in the search functionality.
- Impact: Keyboard-only users and screen reader users cannot successfully complete core tasks like searching for content or navigating search results.
- o WCAG Success Criteria: 2.1.1 Keyboard (A), 2.4.3 Focus Order (A), 2.4.7 Focus Visible (AA)

3. Improperly Identified UI Components

- Description: Navigation elements, menus, accordions, and buttons lack proper ARIA roles, states, and properties, with collapsed/expanded states not being announced.
- o **Impact:** Screen reader users cannot determine the state of interactive elements or understand what will happen when activating them.
- o WCAG Success Criteria: 4.1.2 Name, Role, Value (A)

Disabilities Impacted

Blind and Low-Vision Users

- **Issues:** Autoplay content constantly interrupts navigation, missing alternative text on key images, inadequate labels on navigation menus and form controls, and inconsistent heading structures.
- **Impact**: Blind users face significant friction when trying to perform basic tasks like searching for medical information or accessing book content, often unable to complete critical workflows.

Users with Motor Disabilities

- Issues: Poor keyboard accessibility, lost focus when submitting forms, unpredictable focus order, and inadequate visual focus indicators.
- **Impact:** Users who rely on keyboard navigation or alternative input devices cannot reliably navigate the platform or access search functionality, making core features inaccessible.

Neurodiverse Users

- **Issues:** Inconsistent navigation patterns, lack of clear structure, unexpected content changes, and insufficient visual cues.
- **Impact**: Neurodiverse learners may experience cognitive overload due to unpredictable behavior and poor information architecture, making it difficult to maintain focus on content.

Page-Specific Findings and Impact Analysis

The following section lists the accessibility findings by URL and WCAG violations and describes their impact on users.

Access Medicine Homepage

https://accessmedicine.mhmedical.com

Issue	WCAG Success Criteria	Description	Example
		without accessible controls	JAWS continuously reads "Harrison's 21st edition cover", "CMDT 2025 cover" during navigation.
			Menu items like "Review Questions" read as "link collapsed" without context.
HEACHE MEDITAL		Multiple interactive elements lack sufficient focus indicators.	McGraw-Hill icon, search button, and navigation items have poor focus visibility.
	3.3.2 Labels or Instructions (A)	IISASTON TIAIN ISOKS NIONAT ISNAIINN	Search bar announces as "auto-suggest" without clear indication it's an editable field.

Impact Summary: Blind users and those using screen readers experience constant interruptions from the autoplay content, making site navigation extremely difficult. The search functionality, a primary method of accessing content, is largely inaccessible due to poor labeling and focus management. Keyboard users struggle to determine their location on the page due to insufficient focus indicators.

Access Medicine Landing Page

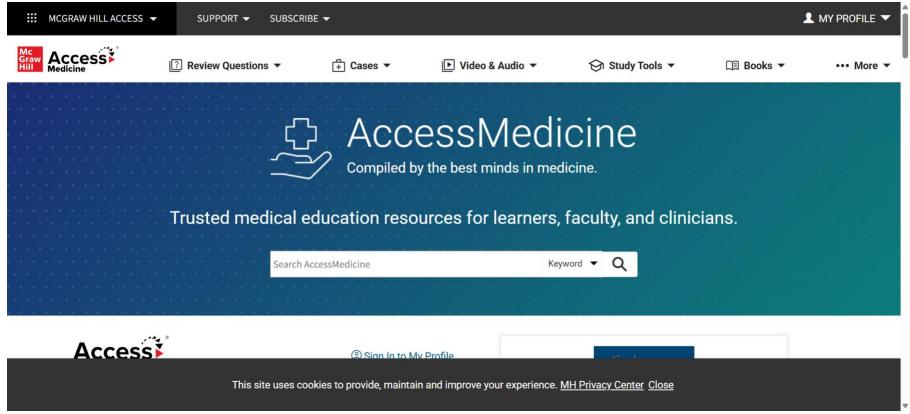


Figure 1. The Access Medicine landing page.

Search Page Results for "hemangioma"

Issue	WCAG Success Criteria	Description	Example
Keyboard Access	II	Critical filter elements cannot be accessed via keyboard.	"Select Textbooks" and "Topics" dropdowns cannot be reached using keyboard navigation.
Focus Management	2.4.3 Focus Order (A)	When entering search terms, focus is lost after tabbing out.	User loses position on page after entering a search term.
IIFORM I ANAIS	3.3.2 Labels or Instructions (A)	INDARCH TIITARS IACK NIONAR IANAIS	Checkboxes under "Filter Results" are not programmatically associated with their grouping labels.
			Screen readers don't announce when results change after applying filters.

Impact Summary: The search functionality, which is essential for locating medical information, presents significant barriers for keyboard and screen reader users. The inability to access filter controls via keyboard prevents users from refining search results, while poor focus management makes it impossible to maintain context when entering search terms. Users cannot tell when their actions have resulted in updated content.

Search Results Page (hemangioma)

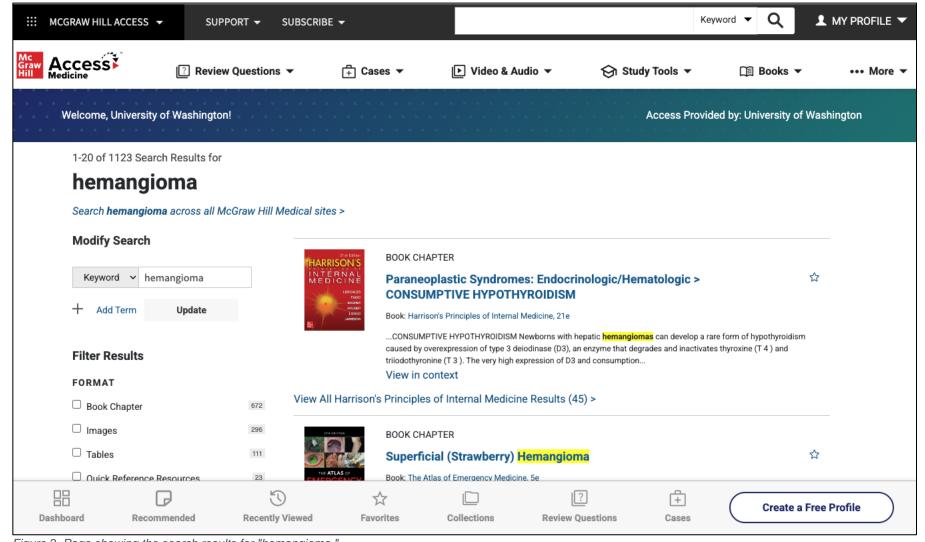


Figure 2. Page showing the search results for "hemangioma."

Format and Filter Results

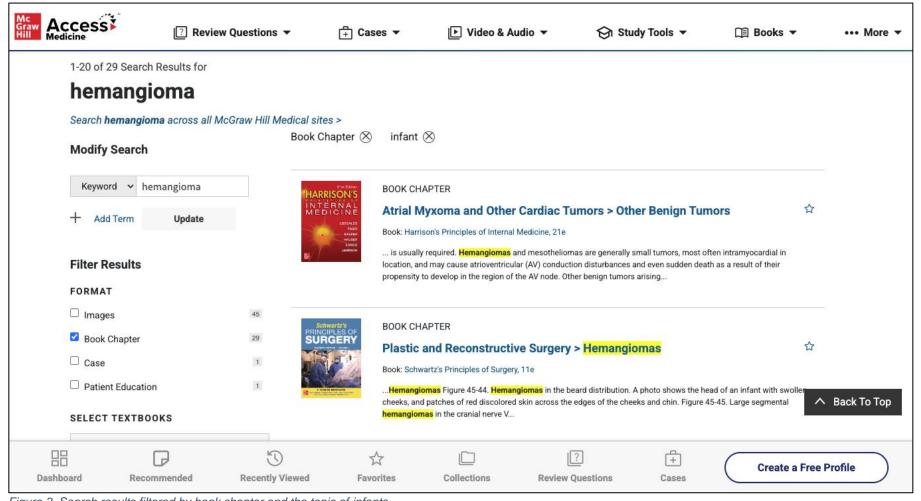


Figure 3. Search results filtered by book chapter and the topic of infants.

Books Page and Chapter View

Issue	WCAG Success Criteria	Description	Example
Content Structure	1.3.1 Info and Relationships (A)	Books are not organized into a programmatic list.	In both Grid and List views, books appear as individual links without list structure.
Expandable Sections	4.1.2 Name, Role, Value (A)	Expandable sections don't announce their state.	Section expanders (e.g., "+ Further Reading") cannot be reached via keyboard and don't announce expanded/collapsed state.
Keyboard Access		Critical book navigation controls are not keyboard accessible.	In the Sections sidebar, "Expand All Sections" link and close button cannot be accessed via keyboard.
Visual Focus		Book navigation tabs lack sufficient focus indication.	"Full Chapter" and "Figures" tabs have poor focus visibility.

Impact Summary: Once users locate a book, they face additional barriers when attempting to navigate its contents. The inability to use keyboard navigation for critical controls like section expanders prevents access to important content. Poor structural semantics make it difficult for screen reader users to understand the organization of books and chapters.

Example Book Chapter Screenshot

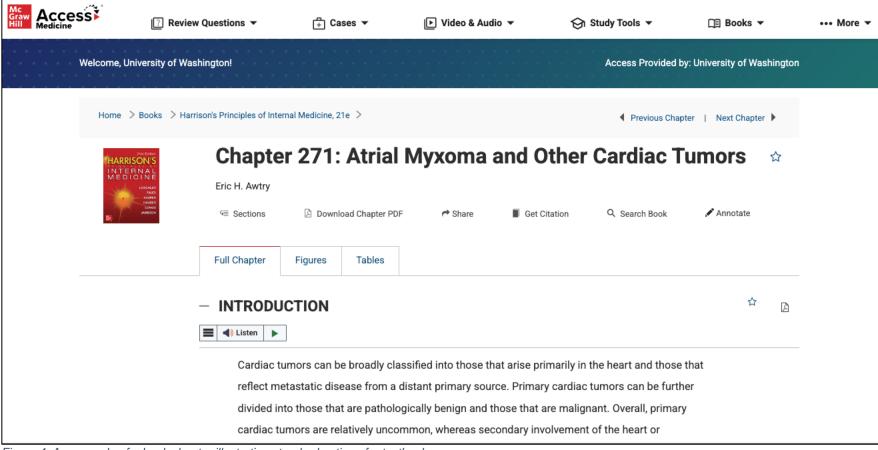


Figure 4. An example of a book chapter illustrating standard options for textbooks.

Patient Interview Videos

Issue	WCAG Success Criteria	Description	Example
Video Controls	4.1.2 Name, Role, Value (A)		Unlabeled buttons for play, pause, volume control make video operation difficult.
Focus Order	I A S FORTIS CHOOLIAL		Upon loading a video, focus is placed in the main content, skipping the navigation menu.
		•	While text content appears, it doesn't describe visuals or non-speech audio elements.
	1.1.1 Non-text Content (A)		Screen readers announce "blank image, no description" for video thumbnails.

Impact Summary: Video content, which provides valuable clinical demonstrations, is difficult to operate with assistive technologies. Unlabeled controls prevent screen reader users from effectively operating the video player. While some text content is available synchronously with videos, it doesn't provide complete on-screen information about visual content, limiting access for blind users.

Closed captions are available and are synchronized with the text transcript. At times, some caption text does cover text that appears on-screen, making it difficult for sighted users.

Patient Interview Video Page

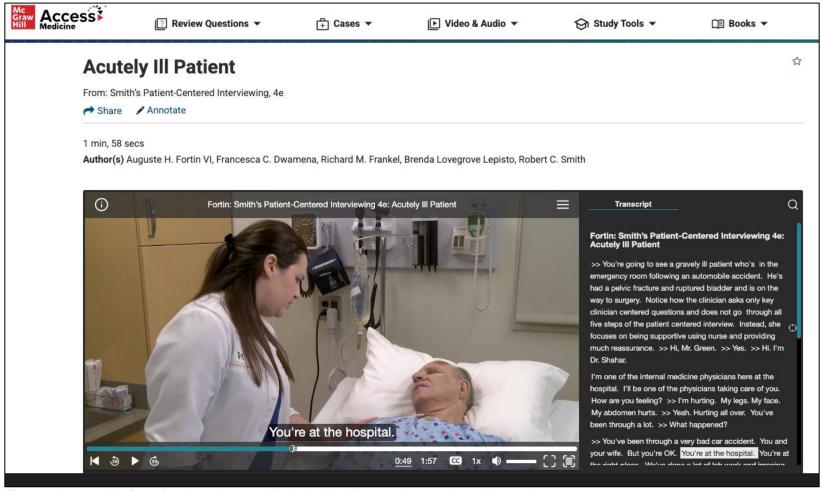


Figure 5. An example of a patient interview page displaying the video, caption controls, and transcript.

Code Snippets

Below are examples of critical WCAG success criteria violations and recommended fixes:

1.4.2 Audio Control - Autoplay Content

- 1. <!-- Current implementation (problematic) -->
- 2. <div class="carousel" autoplay>
- 3. <!-- Carousel items with no pause control -->
- 4. </div>
- 5.
- 6. <!-- Recommended fix -->
- 7. <div class="carousel">
- 8. <button aria-label="Pause carousel" class="carousel-control">Pause</button>
- 9. <!-- Carousel items -->
- 10. </div>

4.1.2 Name, Role, Value - Menu Items

- 1. <!-- Current implementation (problematic) -->
- 2. Review Questions
- 3. <!-- Recommended fix -->
- 4. <button aria-expanded="false" class="menu-item" aria-controls="review-submenu">
- 5. Review Questions
- 6. </button>
- 7.
- 8. <!-- Submenu items -->
- 9.

2.1.1 Keyboard - Search Controls

- 1. <!-- Current implementation (problematic) -->
- 2. <div onclick="filterResults()" class="filter-control">Filter</div>
- 3. <!-- Recommended fix -->
- 4. <button onclick="filterResults()" class="filter-control">Filter</button>

3.3.2 Labels or Instructions - Search Input

- 1. <!-- Current implementation (problematic) -->
- 2. <input type="text" class="search-medicine">
- 3. <!-- Recommended fix -->
- 4. label for="search-med">Search Access Medicine/label>
- 5. <input type="text" id="search-med" class="search-medicine">

1.1.1 Non-text Content - Video Thumbnails

- 1. <!-- Current implementation (problematic) -->
- 2.
- 3. <!-- Recommended fix -->
- 4. <img src="aortic_regurgitation.jpg" class="video-thumb"
- 5. alt="Thumbnail for Aortic Regurgitation video">

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Final Thoughts and Recommendations

McGraw Hill Access Medicine continues to have significant accessibility barriers that prevent equitable access to its valuable medical content. While some minor improvements have been made since the 2019 evaluation, many of the same core issues persist, particularly regarding keyboard navigation, proper ARIA implementation, and form controls.

The platform's autoplay content presents a new serious barrier that wasn't highlighted in the previous evaluation. Addressing these issues is essential for ensuring that medical students, practitioners, and researchers with disabilities can effectively use this important educational resource.

Recommended Fixes

- Provide controls to pause or stop autoplay content on the homepage, ensuring they are keyboard accessible and properly labeled.
- Implement proper ARIA roles, states, and properties for all interactive elements, particularly in navigation menus and expandable content.
- Improve keyboard accessibility for all interactive elements, particularly search filters and video controls.
- Ensure all form controls have proper labels that are programmatically associated with their inputs.
- Fix focus management throughout the site, especially in search functionality and form submissions.
- Add meaningful alternative text to all non-decorative images, particularly book covers and video thumbnails.
- Provide complete transcripts for video content that describe both audio and visual information.

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Comparison to 2019 Evaluation

The 2019 accessibility evaluation identified several critical issues, many of which still persist in the current implementation. While some improvements have been made, significant barriers remain:

Improved Areas:

- Some heading structure improvements, though inconsistencies remain
- Video content now includes some text content alongside videos
- Some lightboxes and dialogs implement better focus management

Continuing Issues:

- · Keyboard accessibility remains problematic, with many interactive elements still inaccessible
- Focus management and visibility continue to be inconsistent and problematic
- · ARIA implementation for custom controls remains inadequate
- Image alternative text is still missing in many places
- Form labeling continues to be problematic throughout the platform

New Issues:

- Autoplay content on the homepage creates significant barriers for screen reader users
- Search functionality exhibits new focus management problems
- · Video player controls lack proper labeling

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Disclaimer

Accessiblü prepared this report as a high-level accessibility evaluation of the McGraw Hill Access Medicine platform. The evaluation utilized industry-standard testing methodologies, including screen reader testing (JAWS 2025), keyboard-only navigation, and manual inspection for select WCAG 2.2 AA success criteria.

This report does not represent a comprehensive WCAG compliance audit and should not be seen as a certification of accessibility compliance. While we have identified significant accessibility concerns and usability barriers, this evaluation was limited in scope and may not encompass all accessibility issues on the platform.

No Legal Liability:

Accessiblü offers this report for informational purposes only. It assumes no legal responsibility for accessibility violations or compliance failures resulting from its use. Organizations seeking formal certification should conduct a comprehensive audit and user testing with individuals with disabilities.

Limitations of Testing:

This evaluation was conducted at a specific time, and platform updates may have occurred after testing was completed. Additionally, while automated tools and expert reviews were utilized, real-world users with disabilities determine the true measure of accessibility.