

## THE ART OF ORAL PRESENTATIONS

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One of the most rewarding aspects of attending the Annual Meeting is the wealth of knowledge that can be obtained from the oral presentations. We would like to share with you some basic principles for successful presentations. We welcome your feedback.

### Content

- Identify 2—5 key concepts and build your talk around them.
- Keep the concepts simple. Most people cannot handle more than 4—5 "chunks" of new information at a time (with us it is closer to 2—3!). Refrain from including everything you know.
- Use notes and stick to them. Your notes are most useful at the beginning (when you are likely to be anxious), and at the end.
- Anticipate questions during the preparation of your talk and have answers ready.
- Maintain consistency between your slides and your talk. Disjointed presentations may confuse your audience.
- 45-minute presentations (e.g., workshops): Tell them what you are going to tell them (objectives, outline), then tell them what you told them you were going to tell them (your content), then summarize what you told them (your take home points). Repetition is good.
- 10-minute oral abstract presentations: Introduction and Objectives (1—2 slides), Methods (2—4 slides), Results (2—4 slides), Conclusions (1 slide).
- 10-minute clinical vignette presentations: Introduction and Learning Objectives (1—2 slides), Case Description (2—4 slides), Discussion (2—4 slides), Take Home Points (1 slide).

### Slides

- Avoid too many colorful slides. Your audience will wonder how you prepared the slides and may not pay attention to your talk.
- Spend about 1 minute per slide. Less time is not enough.
- Blue background and white/yellow letters work fine. Use any other combination of colors at your own risk!
- Anatomical artwork: Dark letters and light background work well.
- Maximums: 5—7 lines per slide, 42 characters or 7 words per line.
- Text: Use 4—5 bullets rather than continuous prose.
- Font: Avoid italics and do not use solely uppercase. If you can read the slide without a projector it will be legible on the screen.
- Tables: Simplify data. Avoid 2 decimal points if not needed. Keep only relevant rows and columns. For a 2-column table use <sup>2</sup> 5 rows. For a 3-column table use <sup>2</sup> 3 rows.
- Bar graphs: Use a maximum of 8 separate bars, or 3 pairs if comparisons are made.
- Graphics: Keep detail to a minimum. Keep font readable from the back of the room. If you crop figures, assure that they are still understandable.
- A picture is worth a thousand words: Try to use them. With PowerPoint presentations, you can insert pictures that have been scanned or downloaded from the Internet.
- Never photograph tables from journal articles or books. Retype them instead.
- Check spelling (once, twice, and thrice).
- PowerPoint presentations: Technology is wonderful but always have backup, "hard-copy" traditional slides. Remember, the colors and contrast that you get in your PC fade with projection. Avoid too many special effects.
- Never apologize for slides that nobody can read or that are too small. If you need to apologize, you should not use the slide. It should be re-done.
- If you need a slide twice, have a duplicate. Don't go back and forth.
- Orientation of slide: Horizontal (landscape) will project better.
- Orientation of overheads: Vertical (portrait) will project better.
- Never, never, never put your slides in your luggage. They should always be within reach!

## Presentation

- Seniority is not synonymous with a great presentation. Some of the best presentations we have seen have been made by medical students, house officers, and junior faculty.
- Pictures, graphs, drawings: Describe the contents, meaning of axes, and symbols.
- Keep "slang," if any, to a minimum.
- Speak slowly. Pause between slides. Let the audience finish reading the slide. Speak toward the microphone, not toward the side.
- Don't hurry, avoid monotonal speech, and eliminate mannerisms (ahs, uhs, ehs, or gestures).
- Look at your audience. We find it calming to choose 2—3 faces in the audience to which we can anchor.
- Use of cartoons/jokes: Here you have to develop your own style. Some people are good, some are not. Be sensitive to your audience.
- Laser pointer: Use both hands. Use the pointer only to point, then remove your finger from the ON/OFF button. You'll make your audience dizzy if the laser pointer is ON all the time. Don't "attack" your audience with the pointer.
- Always rehearse your presentation with your peers and accept their honest, sometimes tough, criticism.
- Time your presentation and never exceed the time allotted.
- If English is not your native language, rehearse 2—3 times.
- If English is your native language, follow the advice given above.
- If possible, audio- or videotape yourself. You will be amazed at the feedback that you will give to yourself.
- Another option: Write your entire presentation.
- Questions: Repeat the question for the audience and answer it briefly. Don't be afraid of questions. By the time you have read the literature, conducted your study, and prepared your presentation, you are an expert in the field.
- Be familiar with your stage. Your anxiety level will decrease if you know how to use the equipment and how it is distributed.
- Some presenters find that a small dose of propranolol is helpful. Take a test dose several days in advance and rehearse your presentation before going live.

Remember, plan the content of your talk. This is the essence of your presentation. Plan the delivery of your talk. This is as important as planning the content, and it also helps you clarify the content. Finally, you may use your talk again. Your last slide should contain a brief description of your presentation, date, filename, location in your PC, and typist. SGIM

### *References*

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5. Salasche SJ. How to prepare and present a scientific talk. A primer. *Dermatol Surg.* 1997;23:135—43.
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