How to Give a Talk

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Outline

- Preparation
- Structure
- Delivery
Preparation

- Abstract should reflect near final data, if not final
  - Ok to perform additional sensitivity analyses, add more complex findings later
- Begin planning as soon as talk accepted for oral presentation
- Best preparation is writing the paper, submitting to journal, and receiving reviewer comments
  - Double the work if do this later
- Ask yourself early: What is the purpose? Why is this important and interesting? What do people need to know about the background to understand?
- Know your audience
Structure

- Many different formats (but ours is the best!)
- Use contrasting colors
- Should be able to read in the back
- Goal is simplicity and clarity
- Prefer not to use widescreen unless forced
Structure

- Title
  - Can be provocative
  - Large, bold font
  - Author list organization
  - Don’t emphasize yourself
  - Icons are good
  - Include institution

- DON’T WASTE TIME ON THE TITLE SLIDE
- Let the audience read disclosures and move on
Structure

- Background
  - Descriptive title (not just “background”)
  - Try to never go below 20-24 font if possible
  - Clearly set up talk
    - Introduce the topic
    - State the problem, and why its important, why should your audience care?
  - Pitfalls:
    - Too long
    - No clarity on the problem
    - Overstating importance or novelty

Merkow RP et al., JAMA 2015
Structure

- Objectives
  - Same as abstract
  - Up to three

Objective

- Define the actual cost of individual 30-day complications using robust, clinical data from a diverse group of hospitals
Structure

- **Methods**
  - Be concise, only the relevant information
  - Patient population, dataset used, exposure variable(s) definition, outcome(s) definition, statistical analysis
  - For quick shot:

<table>
<thead>
<tr>
<th><strong>Patients</strong></th>
<th><strong>Outcomes</strong></th>
</tr>
</thead>
</table>
| - Surgical patients (n=6,387) who underwent surgery at 4 Illinois hospitals  
  - 1 academic medical center  
  - 1 comprehensive community  
  - 2 community | - ACS NSQIP data  
  - Standardized, 30-day outcomes |

**Statistical Analysis**

1) Unadjusted cost among patients with/without a complication
2) Adjusted costs  
   - Median regression, accounting for hospital effects and patients factors

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**Northwestern Medicine**
Feinberg School of Medicine
Structure

Results
- Use descriptive titles, not just “results” (e.g., “Patient Characteristics”)
- **Do not** copy tables from paper
- Never say “this slide is hard to read”
  - Recreate tables / figures for the talk
- Carefully use animation (distracting if too much)
- Go slow – must walk people through tables / figures
- Keep it simple
- A confusing figure will derail your message

- Pitfalls:
  - No interpretation in this section
  - Don’t overstate data
  - Don't rush this section
  - Don’t over complicate the data and your message
Structure

- Discussion
  - Summary slide
  - Limitations
    - Don’t just state the obvious
    - Can inoculate yourself here
  - Conclusions
    - Not a summary
    - Interpret your findings and indicate implications
    - Next steps (don’t just say “A trial is needed to…”)

- Pitfalls
  - Redundant
  - Over stating findings and importance
  - Not sticking to organization of objectives, emphasizing sub-analyses/sensitivity analyses, not main findings
Structure

- Acknowledgements
  - OPTIONAL
  - VERY brief
  - Do not be dramatic or overly reverent
  - Picture is fine

- Last slide is title slide
Delivery / Day of Talk

- Go to the room early, stand at the podium, learn slide advancement etc
- Talk slowly, deliberately
  - Take introductory sentence to podium and read it to break the seal
- Timing
  - Goal is 10 min for 12 min talk etc.
- Stand strong, tall, eye contact
- Ok to memorize at first, but practice at nauseum
  - Eye contact (DO NOT READ YOUR TALK)
  - Prune words on the slide over time
- Avoid jargon, abbreviations no one knows
- Know your audience
- Have fun – be excited to share your data!
Q & A

- Bring paper and pen to be ready
- Be polite, friendly, and confident
- Do not lie, or make up data
  - Better to say you do not know
- Be prepared!
- If you don’t understand a question, you can:
  - Restate the question
  - Ask the moderator for clarification
  - Answer what you think is relevant
- Do not be
  - Arrogant, lose your cool, argumentative
  - Do not ignore questions (you’re not at a political debate)
- Discussant can be a friend or foe
  - Send talk early, send draft of paper early
  - Appropriately respond to tips / critiques / suggestions
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