

Syrian Private University

Medical Faculty

Communication Skills Art



Effective Professional Presentation Skills

Mr.M.A.Kubtan , MD-FRCS

2018-2019

Objectives

Students will

- Utilize PowerPoint effectively
- Become professional public speakers
 - Communicate effectively
 - Motivate, instruct and involve audience
 - Cite appropriate references
- Work well as a team

Body Language

- Dress professionally
- Face your audience
- Audience focus: maintain eye contact with audience
- Point and re-orient
- Be enthusiastic



Speak Clearly

- Speak at reasonable pace
- Use inflection (نبرة الصوت)
- Project your voice. Do not mumble (غمغم).
- Talk to the audience: Not screen, camera, notes, or self
- Use professional language. Avoid idioms / slang (الكلام العامي) .

Audience Involvement

- Involve the audience .
- Ask questions; call on individuals; small group activities
- Utilize progressive disclosure (التعابير القوية)
- Repeat what they say
- Write responses on white board or flip chart

Practice

- If group: rehearse as a group
 - Check timing
 - Provide feedback to each other
- If individual: rehearse with friend or faculty
- Rehearse without PowerPoint
- Rehearse with PowerPoint in classroom

لا تتردد أو تترثر

Um Aah

Giving the Presentation

- Introduce topic
- State the objectives
- Motivate
- Present the material
- Include References
- Review at the end
- Assess audience understanding

Effective Use of PowerPoint

- The Good, the Bad
- and the Ugly

Maximizing Visibility

Font size minimums

- Titles - **32 point**
- Text in bulleted lists - **20 point**
- San serif font best – Consistent (استعمال الأحرف الصغيرة ضمن المعقول)

Use of Colors

- High contrast
- Dark background with light letters
- Light background with dark letters OK

Maximizing Visibility

- Font size minimums:
 - Titles - **32 point**
 - Text in bulleted lists - **20 point**
 - San serif font (استعمال الأحرف الصغيرة ضمن المعقول)
- Use of Colors
 - High contrast
 - Dark background with light letters
 - Light background with dark letters OK



Maximizing Visibility

- **Font size minimums:**
 - Titles - **32 point**
 - Text in bulleted lists - **20 point**
 - San serif font (استعمال الأحرف الصغيرة ضمن المعقول)
- **Use of Colors**
 - High contrast
 - Dark background with light letters
 - Light background with dark letters OK

Appropriate Composition

- One major concept per slide
- Keep slides simple, balanced
- Keep a border

Use of Text (Rule of 6)

- Outline of talk – not every word
- Put talk in speaker notes
- 6 lines per slide – 6 words to line
- Quotation (الإقتباس) are OK
- No full sentences
- Delete articles (the, a, an)
- Illustrate concepts

Use of Images

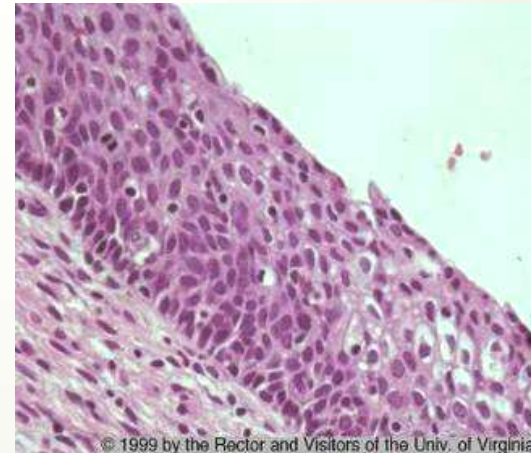
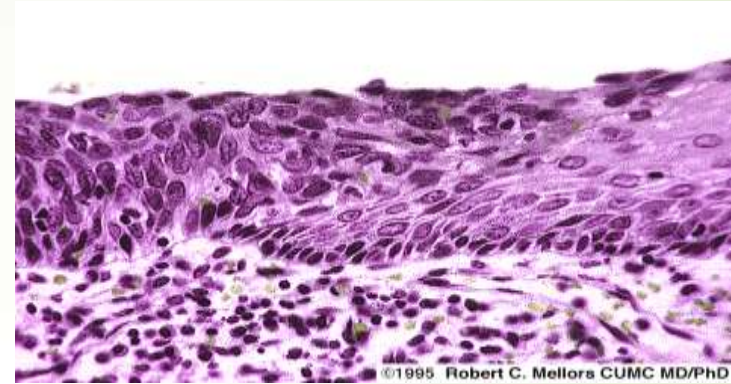
- Use one image per slide
- Two to contrast, but make them big
- Draw arrows – animate
- Do not enlarge small images
- Do not distort the image
- Credit the source
- author, book/article/website, date, URL

Pathology

**FUNGATING SQUAMOUS CELL CARCINOMA:
HYSTERECTOMY SPECIMEN**



The Bad Example



Mole vs. Dysplastic Nevus

Ordinary Moles

Between 10 and 40 typical moles may be present on an adult's body.

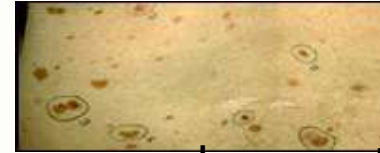


Usually found above the waist on sun-exposed surfaces of the body. Scalp, breasts, and buttocks rarely have normal moles.



Dysplastic Nevus

May be present in large numbers (more than 100 on the same person). However, some people have only a few dysplastic nevi.



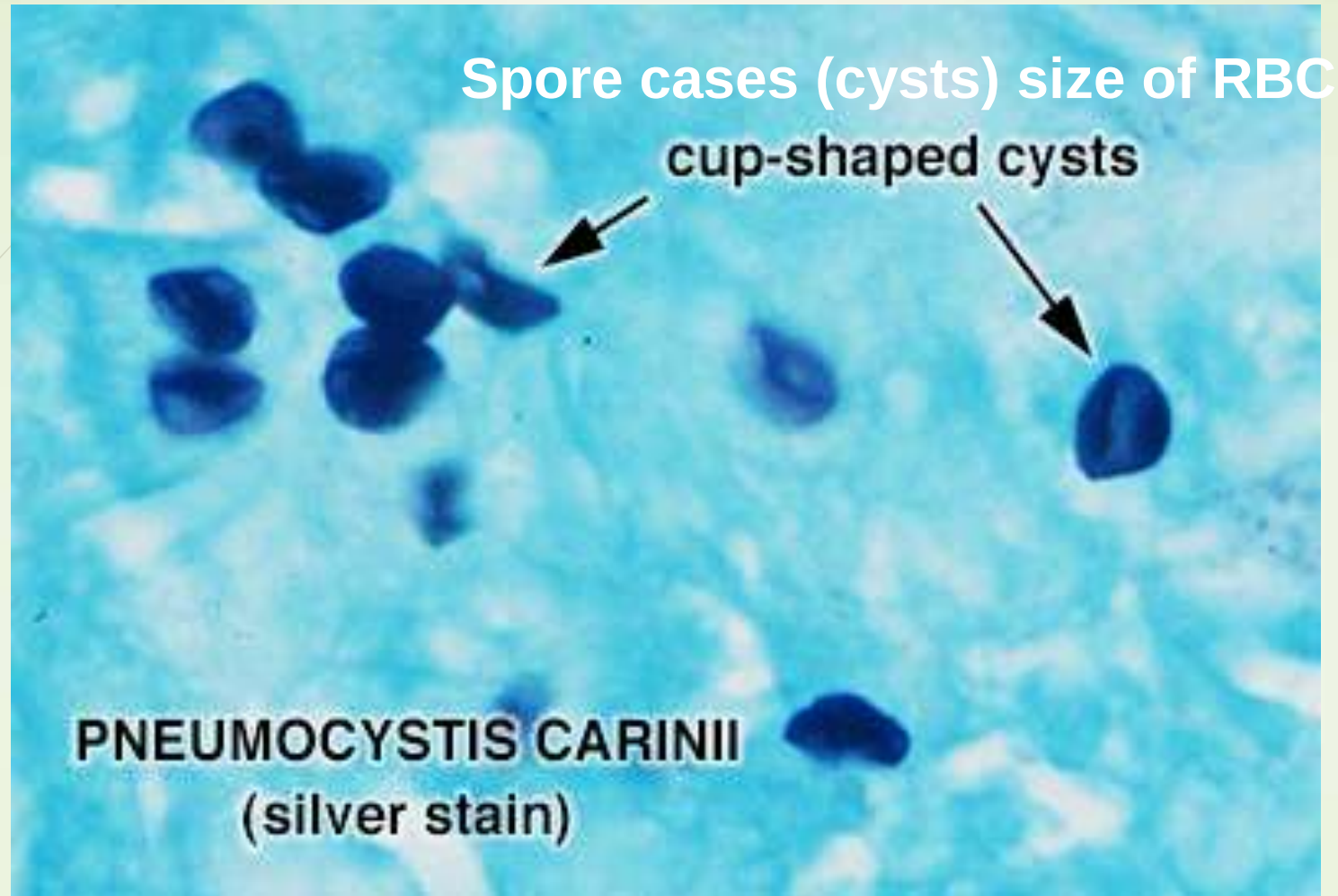
May occur anywhere on the body but most frequently on the back and areas exposed to the sun. May also appear below the waist and on the scalp, breasts, and buttocks.



BEFORE

MRI Abnormal Mass Left Femur





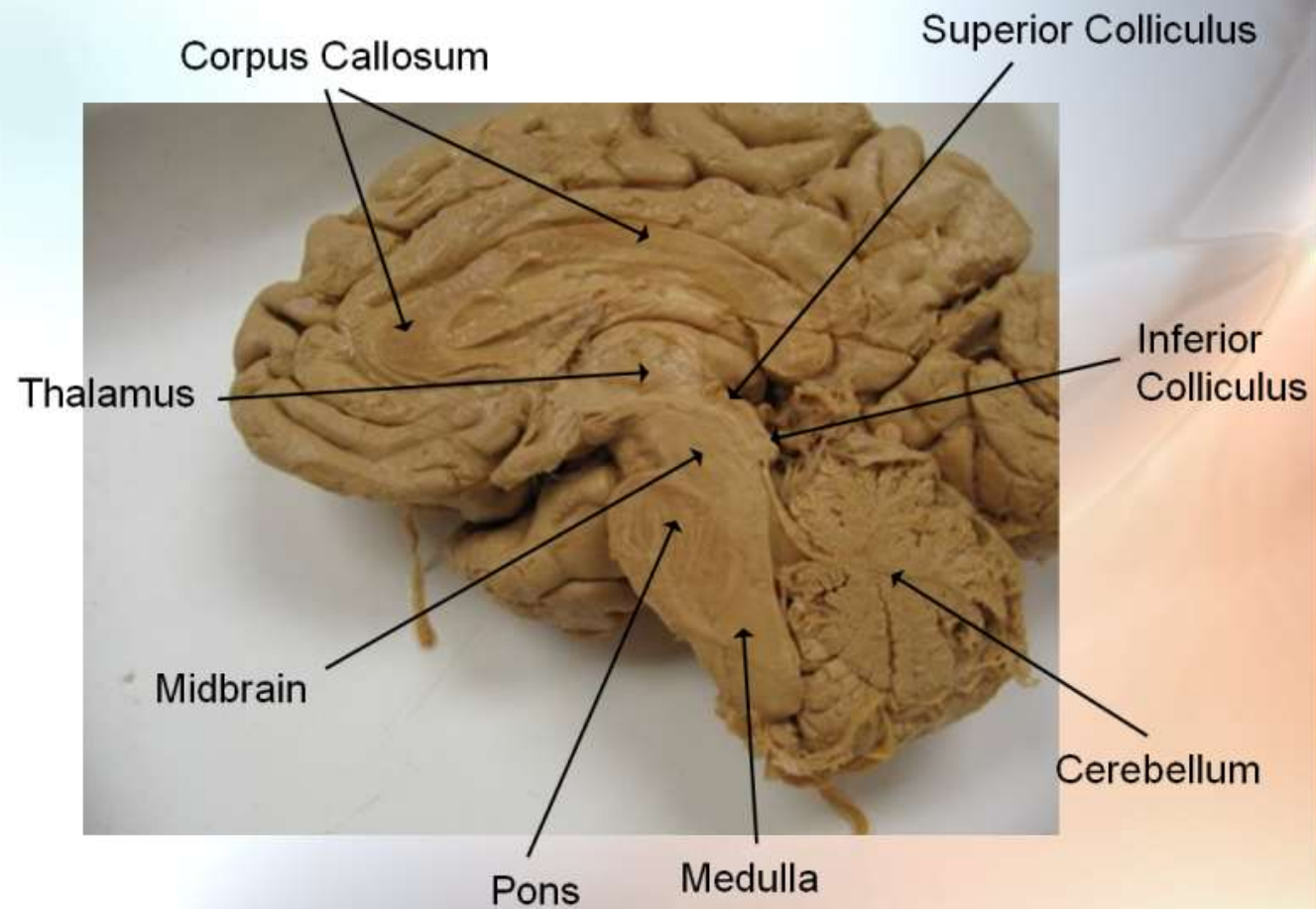
Robichaux, WH. Tulane Medical Pathology Course Website. Tulane University. (2005)

http://www.som.tulane.edu/classware/pathology/medical_pathology/overview.html

(Gomori methenamine silver)

http://www.som.tulane.edu/classware/pathology/medical_pathology/

CNS Dissections



Citation of References

Credit images and studies on slide

- Author, date, title of article, and journal
- References on last slide – APA or AMA format
- www.MDConsult.com is not a reference
- Track to source materials
- NEVER CITE Wikapedia

Bhutto AM SA, Nonaka S: Incidence of xeroderma pigmentosum in Larkana, Pakistan: a 7-year study. *Br J Dermatol* 2005; 152(3): 545-51.

References

- www.wadsworth.com
- www.CrohnResearch.com
- www.NIDDK.nih.gov
- www.mdconsult.com
- www.medscape.com
- Dr. Klatt's Webpath

Resources

- eMedicine:
 - http://www.imedicine.com/DISPLAYTOPIC.ASP?BOOKID=7&TOPIC=596#SECTION-multiple-system_atrophy
- eMedicine:
 - <http://www.imedicine.com/DisplayTopic.asp?bookid=7&topic=671#SECTION-clinical>
- National Institute of Neurological Disorders and Stroke
 - <http://www.ninds.nih.gov/disorders/msa/msa.htm>
- DynaMed:
 - <http://dynamed101.epnet.com/Default.aspx?id=116603>

Address <http://www.imedline.com/DISPLAYTOPIC.ASP?BOOKID=7&TOC=596> Go Links SnagIt

[Home](#) | [Help and Support](#) | [Add to Favorites](#) | [Feedback to eMedicine](#) | [Logout](#)

The eMedicine Clinical Knowledge Base, Institutional Edition, is brought to you by:

 **Florida State University Medical Library** 

Search the Clinical Knowledge Base [Advanced Search](#) [Additional Searches](#) [Drug Search](#)

[Articles](#) [Images](#) [Search Help](#)

Parkinson-Plus Syndromes

[Table of Contents](#)

[Resource Centers](#)

Neurology - Movement And Neurodegenerative Diseases

[Format for Printing](#) [Get CME/CE for article](#)

[Rate this article](#) [Email to a colleague](#)

[Search for Guidelines](#) [Search MEDLINE](#)

Last Updated: October 5, 2005

Synonyms and related keywords: Parkinson disease, PD, Parkinson's disease, atypical parkinsonism, multiple system atrophy, MSA, progressive supranuclear palsy, PSP, parkinsonism-dementia-amyotrophic lateral sclerosis complex, PDALS, corticobasalganglionic degeneration, CBGD, diffuse Lewy body disease, DLBD, parkinsonian features

AUTHOR INFORMATION Section 1 of 9 [Next](#)

[Author Information](#) [Definition](#) [Multiple-system Atrophy](#) [Progressive Supranuclear Palsy](#) [Parkinsonism-dementia-amyotrophic Lateral Sclerosis Complex](#) [Corticobasalganglionic Degeneration](#) [Diffuse Lewy Body Disease](#) [Practical Management Of Parkinson-plus Syndromes](#) [Bibliography](#)

Author: **Arif Dalvi, MD**, Program Director, Assistant Professor, Department of Neurology, University of Chicago, Co-director of Parkinson's Disease and Movement Disorders Center

 Internet

References

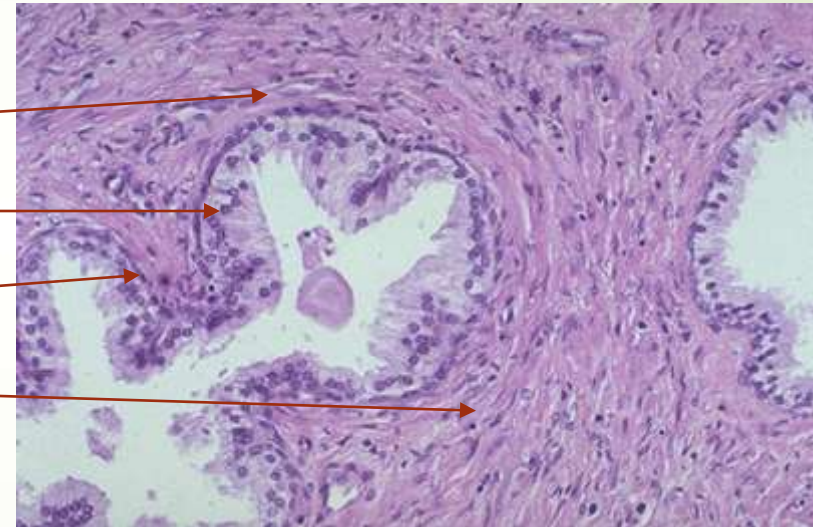
- Daya-Grosjean L S, A: The role of UV induced lesions in skin carcinogenesis: an overview of oncogene and tumor suppressor gene modifications in xeroderma pigmentosum skin tumors. Mutation Research. 2005; 571: 43-56.
- Hebra E, Kaposi M. On Diseases of the Skin Including the Exanthemata. Vol. 3. (Tay W, trans.). London: The New Sydenham Society, 1874; 61:252-8.
- Hedera, P and Fink, JK. Xeroderma Pigmentosum. March 1, 2005. Available at: <http://www.imedecine.com/DisplayTopic.asp?bookid=7&topic=399>. Accessed April 30, 2005.
- Horenstein, MG and Diwan, AH. Xeroderma Pigmentosum. October 1, 2003. Available at: <http://imedecine.com/printtopic.asp?bookid=2&topic=462>. Accessed April 29, 2005.
- Imaeda, S. Cockayne Syndrome. November 12, 2002. Available at <http://www.emedecine.com/DERM/topic717.htm>. Accessed May 1, 2005.
- Marchetto MC MA, Burns DK, Friedberg EC, Menck CF: Gene transduction in skin cells: preventing cancer in xeroderma pigmentosum mice. Proc Natl Acad Sci U S A 2004; 101(51): 17759-64.
- Nucleotide Excision Repair. (2005, April 25, 2005). Retrieved April 29, 2005, 2005, from <http://locus.umdjh.edu/nigms/pathways/ner.html>
- Yarosh D KJ, O'Connor A, Hawk J, Rafal E, Wolf P: Effect of topically applied T4 endonuclease V in liposomes on skin cancer in xeroderma pigmentosum; a randomised study. Xeroderma Pigmentosum Study Group. Lancet 2001; 357(9260): 926-9.

Use of Animation

- Should not kill time
- Should be subtle فصيح
- Do NOT use Animation Schemes
- Custom Animation only
- Use same *transition* between slides
- Should enhance, not distract

Normal Prostate

- Fibromuscular stroma
- Columnar cells
- Myoepithelial cell layer
- Laminated concretions



Differential Diagnosis

- Polycystic Ovarian Syndrome (PCOS)
- Hyperprolactinemia
- Cushing's Syndrome or Disease
- Ovarian Tumor
- Adrenocortical Carcinoma/Adenoma
- Hydroxylase deficiency
- Familial
- Obesity
- Idiopathic hirsutism
- Drug Interaction
- Hyperthyroidism

Number of Slides

- 1 slide = 2 – 3 minutes
- Image slides less
- Time yourself
- Leave time for questions



Questions?

Thank You