

Improving Case Presentations

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Physicians and surgeons working in hospitals in the United States today are inundated with clinical and administrative meetings. Due to the limited time that physicians have for these activities, it is important that case presentations be useful and maximally beneficial. Recently, both of us attended a cardiology—cardiac surgery morbidity and mortality conference in which the presenter used 7 or 8 slides to describe the patient's findings in a confusing and illogical manner. The presentation was so long that there was inadequate time for discussion. While leaving the conference we decided to enumerate some principles of case presentations to maximize their usefulness.

- 1) Humanize the patient. "A 48-year-old former college football All American and now a practicing lawyer developed for the first time substernal pressure which radiated to his left arm while running and it disappeared a few minutes after resting." Compare that to "A 48-year-old male developed chest pain while running..."
- 2) Describe the patient's illness chronologically. Start with the patient's age and gender and then describe events by age rather than calendar dates. For example: "A 63-year-old man had no significant health problems until age 51 when..." That form is preferable to "This 63-year-old man had no significant illness until 2003..." Using dates requires the listener to calculate the age. Dates, however, may be preferred if the illness has been of short duration (<1 year) but not with long-term illnesses. The use of putting the "chief complaint" in the first sentence of a presentation, as recommended by many (including the 2 reviewers of this manuscript), interferes, in our view, with describing the illness in a logical sequence.¹
- 3) Call an adult "man" or "woman" and a child a "boy" or "girl" rather than "male" or "female." Only in a hospital or jail are adults in the United States referred to as "male"

or "female." There are exceptions to this principle: If the topic of the presentation includes both children and adults using "male" or "female" as a noun may be reasonable. Additionally, using "male" or "female" as an adjective, however, is acceptable: "A 63-year-old male lawyer..." or "A 63-year-old female professor..." "Guy" and "Gal" should never be used. "Gentleman" and "lady" are subjective terms to be avoided.

- 4) Use "black" and "white" for race rather than "African American" and "Caucasian." "European American" is the parallel phrase to "African-American" but it is rarely used. White is parallel to black. The rule of parallelism is best followed in descriptions of race.
- 5) Build the presentation to emphasize lessons to be learned from the case. Nonpertinent details of the case, known to the presenter, do not require presentation to the audience. Refrain from "showing off" how much the presenter knows about the patient's condition.
- 6) Summarize the patient's story on a single slide and leave it on the screen during the entire presentation. More thought is required to prepare a single slide than multiple slides. Summarizing the case on a single slide is a challenge but is well worth it. A single slide helps to avoid meandering presentations using multiple slides.
- 7) Clarify what is unusual about the patient being presented. What is the single unique feature of the case? For example, if the patient has systemic lupus erythematosus (SLE), focus on what is unusual about the SLE in this particular patient. To recognize the "unusual," one has to know the "usual" and that requires a thorough knowledge of the disease.
- 8) Avoid casualness. Make the presentation as formal as possible. Not everyone in the audience will approve of casualness. Some attendees may consider it a kind of disrespect. Do not waste the time of the audience by a lack of preparation which reflects casualness.²
- 9) Be presentable. For a man, proper clothes, a tie, polished shoes and a clean-shaven face is preferred. For a woman, modestly dressed business attire, classic heels or flats, and accessorized with minimal jewelry and belts. A slovenly appearance is a distraction. A clean white coat is ideal and mandatory if wearing scrubs.

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¹Both reviewers of this editorial disagreed with this view point. One reviewer commented: "I think that having a chief complaint right up front in the very beginning of the presentation ...will not interfere with... describing the patient's illness chronologically." The other Reviewer commented "Often a disorder begins years earlier and ultimately results in the chief complaint for which the patient presents. In such cases many find it preferable to start with a chief complaint and then address the "History of the Present Illness." Of course, if no history of the present illness exists, the authors are sound in recommending that a specific chief complaint be dropped."

²One Reviewer commented: "The recommendations regarding a presentable appearance are likely to generate some disagreement. No question that the presenter should be neat. However, opinions on fashion often differ, including hairstyle. In my own institution the basic scientists often strive to appear in the most casual attire as a statement that intellect rather than appearance is important. I have witnessed excellent talks by presenters in overalls and a tee shirt. This also serves as a statement that science rather than money should be the key motivator. While such scientists do not often do case presentations, they do on occasion, and often influence clinical faculty to emulate them."

- 10) Show up several minutes before the presentation to fix technical issues and learn the devices at the podium: how to change slides, how to turn the lights down, etc.
- 11) Speak up. The audience should not have to strain to hear. Everyone in the room, front and back, should hear clearly.
- 12) Maintain good posture. Don't lean over the podium or sit casually back in a chair.
- 13) Practice the presentation. There is no substitute for practice.
- 14) Anticipate questions to be asked after the presentation. A prepared mind can answer more succinctly.
- 15) Avoid the appearance of arrogance when presenting. Hubris is a fatal flaw in medicine.
- 16) Consider presenting to an audience a privilege, not a burden. Most people in a lifetime do not have the opportunity to speak to an audience. Physicians are

particularly privileged. Presentations may determine one's job offers following training. Poor presentations may prevent the trainee from obtaining the position he/she desires. A good crisp presentation leaves a good impression, personally and professionally, in the mind of the listener, a current or future colleague.

We (the 2 authors) might add that basic science is quite different from the clinical side. The latter deals with human beings who deserve respect and appearance are one sign of respect. Basic science does not directly involve a human being.

Disclosures

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.