

Public Speaking for the Podiatric Physician—Part 2



The key to successful execution is careful planning.

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The Opening

We have previously discussed the importance of the introduction and that an expert, seasoned speaker will give a copy written by the speaker to the meeting planner or the person who is going to introduce you. What you do and say in the first 30-60 seconds will set the stage for your entire program. It is during the opening that you will have the audience's undivided attention. Use this time to establish your expertise as a spokesperson on the disease state, the topic, or the drug that you will be discussing.

You can begin by thanking the meeting planner, the sponsor, or the group for the opportunity to speak to them. If you are from out of town, you can connect with the city you are visiting and you can look up some unique aspects of the city or region on the Internet.

You can also begin with a statistic to capture the attention of the audience. For example, a talk on the diabetic foot might begin with "There are 73,000 leg amputations each year from diabetes. To give you an idea of how many people that is, can you imagine the entire capacity of the Louisiana Superdome having leg amputations each year from a disease that can be detected and treated with podiatric care?"

Avoid clichés such as "I'm delighted to be here." One exception would be if you can make that cliché humorous. For example, if you're from New Orleans, Louisiana presenting in the northern part of the country in the summer months, you might begin by saying, "Most speak-

ers will often start about how delighted they are to be here and you often question their sincerity. However, if you are from New Orleans and the temperature is approaching a "buck-five" or one-hundred and five degrees with 95% humidity, you know when I say I'm delighted to be here, I really mean it!"

Another example is the use of a story as an opener. If you have a story about a patient or, better yet, if you have a personal experience that unites

one-quarter of a million dollars a year. The promise type of opener is sure to capture the attention of the audience as it goes straight to their self-interests. We refer to this opening as tuning into Station WIIFM or "What's In It For Me?"

Avoid beginning your program with an apology. Don't mention to the audience the problems with the audiovisual equipment or the reason that you are late for the program. The audience doesn't care about these issues

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with your topic, that is a great way of connecting with your audience and capturing their attention. For example, in giving a talk on practice management and efficiency, tell the story of when you were called from a room to answer an "emergency" phone call from a patient who, when you spoke on the phone with him, only requested his medical records. You might talk about how you subsequently put in place a system to ensure that this would never happen again.

Another technique to gain the audience's attention is promising them you will tell them how they can get something they want. A talk on practice productivity might begin by promising the audience how they can increase their collections by \$250,000. Then you might show them how just one patient an hour can result in an increase of nearly

and you will immediately lose their attention. They want to be educated, informed, and entertained. There's no better way to do this than by having a compelling and captivating opening that begins immediately after the introducer welcomes you to the podium.

Another caveat is the "royal eye". You should avoid the comment "I'm here to talk about XYZ." This places you in a superior position above the audience and is a turn-off. Instead, begin by saying, "The reason you are here is to learn about XYZ." This places the audience on an equal level as the speaker and they know that there is something in the presentation for them.

Housekeeping Notes

We think it is helpful to tell the audience how long you plan to

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speak and that you will take questions during or at the end of the program. If the audience is small, i.e. fewer than 20, encourage the audience to ask questions during the program and not wait until the end. This presents a more conversational method of speaking as it generates more questions from the audience. If during a meal, speak while the audience is eating and start after the waiters have taken the orders and the audience has had their appetizers. You might want to state that you will finish the program by the time they are ready for their dessert. You might want to also mention a handout to be distributed after the program is over so that they don't have to worry about taking notes, trying to eat, following the handout, and watching the speaker.

The Body of the Program

Follow the rules set out by Aristotle over 2000 years ago and that is to tell the audience what you are going to discuss, make your points, and, lastly, summarize the information. So, begin with the goals and objectives that you want to discuss. This is

actly as they have been provided by the pharmaceutical company. Most pharmaceutical company slides have far too many words and references as well as cumbersome diagrams that are often difficult for the audience to follow. Make an effort to find one salient point on each slide

from the ear to the auditory portion of the central nervous system. Science has demonstrated that we receive 25 times as much attention from visual cues as from auditory ones. The Japanese proverb is true that one seeing is better than 100 times telling!

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and focus the attention on that single word, phrase, or sentence. This can be done in a small audience by walking over to the screen and pointing out that word or phrase, or use the laser pointer to focus audience attention.

Let's be honest—most medical talks are boring and very dry. Therefore, try to inject some energy and enthusiasm in the middle of the program. Every few minutes, ask a question, tell a story, or ask the audience a question. For example, during a program on practice management, relate a story about an unhappy patient and then ask a doctor

A Few Suggestions Regarding the Use of Visual Aids (VA):

1) Keep the visual aid out of sight until you are ready to use it. You don't want the audience to be looking at your visual aid when they should be focused on you or your slide material.

2) Make certain that your VAs are large enough to be seen by everyone in the audience.

3) Do not hand out the VA to the audience during your program. This will certainly take their attention off of you and your material.

4) When you have finished using the VA, put it away.

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usually limited to three and no more than four objectives. Even with a talk sponsored by a pharmaceutical company where the slide deck is fixed and the speaker is not permitted to add or subtract slides, you can still begin by telling the audience what you want to accomplish during the program.

You could begin a clinical program with a case history. Tell about a patient who had a specific problem and how you managed the case. Select a patient who is very similar to patients who would be seen by members of the audience.

Then go through the slides ex-

in the audience how he/she might handle the disgruntled patient. This is a nice break from the main content of your presentation and re-engages the audience. This will make for a more fun and interactive program, and will engage and involve your audience.

Few physician speakers make use of visual aids during their program. They tend to rely heavily upon their slides. You can keep the audience attention focused on you if you make use of visual aids.

Studies have repeatedly shown that that there are more nerve endings from the eye to the brain than

Reiterate the objectives and then let the audience know you are coming to the end of the program. For a dinner program try to time your ending just as the plates are being cleared and just before the dessert is served. Now this is the time to take questions from the audience if they weren't asked during the program. When a question is asked, repeat the question so that everyone can hear it. This also allows a few seconds to think about and frame your answer. If there are too many questions, state that you want to finish on time and will stay around after the meeting is over to answer any additional questions.

Here are a few suggestions regarding taking questions from the audience. When responding to the person asking the question, direct your attention to the person who asked the question. Then spend

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20% of your time focusing on that person and 80% of the time on the rest of the audience. If you only focus on the questioner, then you are creating an atmosphere of a one-on-one conversation which excludes the other members of the audience. You want to end your response to the questioner with your eyes on the group and not on the questioner. This will bridge or segue to the next question by looking at the group instead of the person asking the question. After answering the first question, you can look out at the audience and generate additional questions by saying “next question” or “any other questions?”

After hearing a question, some speakers comment, “That’s a great question.” We suggest avoiding this comment. Why? If you answer the question and then go to the next questioner and don’t mention that they have a “great question”, then the next questioner feels slighted because their question is not so great.

Use of Humor

Most physicians attempt to use humor during their program. Let’s be honest—few of us are a medical ver-

to have. Again, when you say, “I would like to conclude my program with....” you can be assured that this is that magical moment when you have the complete and undivided attention of the audience. It has been shown that the last words the audience hears from the speak-

you have a chance to mingle with the audience and you, the speaker, to get to know the audience and, more importantly, allow them to have an opportunity to get to know you. Many pharmaceutical representatives start putting away their computers and disconnecting the audio-visual

Often the doctors will want to ask you about other issues and concerns in their practices.

er are the ones that are likely to be remembered the longest. For example, a talk on staff motivation might conclude, “Remember, your staff are the first ones that the patient encounters and the last ones that they see before they leave the office. You can make sure that every patient has a positive experience with you and your practice by ensuring that your staff is highly motivated and that you make every effort to recognize their accomplishments (hold up hands and spread out your arms as you say...) “Thank you.” You are certainly likely to receive applause and maybe—if your speech is truly

equipment and ignoring the doctors or the customers in the audience. This is the time to leave your equipment alone and use this time to walk around and sit at the tables and chat with the doctors.

There are members in the audience who may have questions that don’t get asked during the presentation. However, after the program where you interact one-to-one in a less formal atmosphere, questions and discussions will take place at the table or when you are standing around after the meeting is over. So many of the physicians in the audience will use this time to ask you about some of their cases which may be related to the product or device you are discussing. Often the doctors will want to ask you about other issues and concerns in their practices.

Take the names of the doctors and make notes and follow up with a personal letter. This simple follow-up technique makes you a value-added resource long after your program has ended.

After the program is the time to give out your business card. We suggest that you have an ample supply of business cards and give them out if someone asks for your contact information.

After the program is the time to distribute the handout. This may consist of your PowerPoint slides but it is better to distribute a single page with the salient points that you would like the audience to take away from your program. Be certain that each piece of paper or your handout

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Wrap up your talk with your summary statement. This is your take-home message that you want each member of the audience to have.

sion of Jay Leno or Jimmy Fallon. If we were, we wouldn’t be practicing medicine! However, if humor is used judiciously like French chefs use seasoning, humor can do great things for a program. It can break the ice, drive home a point, and make you more likeable. However, it can also backfire.

If you want to use humor, use self-deprecating humor as it is always the safest. Be sensitive about going overboard with political and social humor.

Wrap up your talk with your summary statement. This is your take-home message that you want each member of the audience

exceptional—that sought-after standing ovation!

Be Seated

Franklin Delano Roosevelt summarized the art of speaking when he said, “Be sincere, be brief, and be seated!” When your time is up, it is time to sit down and turn the program back over to the head of the organization, the meeting planner, or the pharmaceutical representative.

You Are Not Done Yet—Action needs to be taken after the program is over. You aren’t done after you’ve finished and sat down.

It is after the program is over that

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contains your name, address, phone numbers, e-mail, and Web address.

Asking for Feedback

Speak with the meeting planner and ask what s(he) thought of the program. You might ask for constructive criti-

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cism and how you might have made the program better.

A helpful way to achieve feedback is to provide a survey to the audience and ask them specific questions that may be useful to your future speaking. Useful questions include: Was this presentation pertinent to your practice? Will the material presented change your prescribing habits? This last question is very useful as an affirmative response gives you

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positive feedback about the program. The survey takes just a moment for the doctor to complete, is not intrusive, and can provide useful and helpful information.

Summary

Public speaking can be a daunting and anxiety-producing event. However, public speaking can be a learned process. No one is a born natural speaker. Everyone can learn how to become an effective speaker either in front of peers or with lay audiences. You can make a compelling and impressive presentation by adequate preparation, by practicing, by attention to following up with the meeting planner and with the audience.

Handouts

Develop a page detailing your key points. Or if you've had an article published, make copies for the audience members. Make sure that the handout includes your name, address, telephone number, e-mail and Web address.

Business Cards

If your goal is to develop new patients, always collect business cards from the audience members. You can offer to send additional information, articles, or tip sheets to them. Or you can offer a door prize (this can be a gift card, foot care product, etc.) and ask that everyone drop their business cards (or provide contest sign-up paper) in a box from which you or the program chair will draw the winner (or winners) at the end of your talk. Have your business cards ready to hand out, but only when someone requests one. Handing them out randomly will come across as solicitous and unprofessional.

**Public speaking,
like the practice of medicine,
is an art.**

Bottom Line

Public speaking before your peers can be a daunting process. However, it is an excellent method of communicating and educating your physicians. Public speaking, like the practice of medicine, is an art. You can only improve your skills and your connections with your audience with attention to details, diligent practice before the program, connecting with your audience, and then meticulous follow-up after the program is over. We all have the potential to be great speakers and to make great connections with our audiences. **PM**

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