

# Making A Great PowerPoint Presentation

Adapted from slides by:

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# Consider Logistics:

How big is the room? How many people?



**Small Group Setting?**



**Auditorium? Formal?**

# Key Slide Design Concepts

- Large
- Simple
- Concise

# Common Slide Problems

- Too many colors
- Too crowded
- Too many symbols on graphs
- Too much animation
- Too many words

# Font Style

- Sans-serif (uniform width) fonts are easier to read
- Tahoma is a sans-serif font
- So is Arial
- Times New Roman is a serif font
- So is Courier

# Font Style

- *Italics are hard to read on screen*
- Normal or **bold** fonts read easier
- Underlines may signify hyperlinks
- Better to emphasize with **colors**

# Font Style Rules

- Don't change font styles mid talk
- ALL CAPITALS ARE HARD TO READ

# Font Size

- Be sure it is big enough 48 pt.
  - Be sure it is big enough 44 pt.
  - Be sure it is big enough 36 pt. Stay Above
  - Be sure it is big enough 32 pt. 32 pt.!
- 
- Be sure it is big enough 28 pt.
  - Be sure it is big enough 24 pt.
  - Be sure it is big enough 16 pt.
  - Be sure it is big enough 12 pt.



# Lines on slides

- Limit bullets per slide
- Omit unnecessary words
- No full sentences
- Bullet points to prompt discussion
- Pay attention to you not slides

# Bullet List

For lists **without**

- Priority
- Sequence
- Hierarchy, .....

# Number List

For lists **with** sequence or hierarchy

For example:

Things I'd like to do on a sunny day in August:

1. Go fishing
2. Nap outside in hammock
3. Give board review talk

# Color Use

- Use contrasting colours
- Light on dark better than dark on light
- Use complementary colours

Good!

# Color Use

- Use contrasting colours
- Light on dark better than dark on light
- Use complementary colours

Not as Good

# Color Use

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- Use complementary colours

Not Good!

# Color Problems

- Be nice to colorblind people
  - No red-green combinations
- Be nice to everyone else
  - No red letters on a blue background
  - Leads to stereopsis
- You forget colors fade on big screen

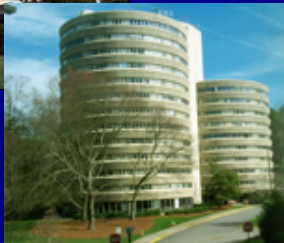
# Picture Limits



- Art/pictures may distract your audience
- 2 at most per slide
- Appearance should not supercede content



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DEPARTMENT OF MEDICINE  
-Division of Geriatrics





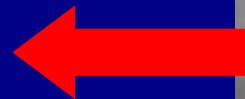
## Readable Slides

- **AVOID BUSY BACKGROUNDS**
- **No matter how cute**
- **No matter how colorful**



# Focal Points

- Graphics direct attention



# Layout

- Be consistent with:
  - Alignment
    - Indenting
  - Line spacing
  - Bullets
  - Line transitions

# Consistent Is Important

- Differences draw attention
- Use only to imply importance
- Surprises to engage not distract
- Do or don't, but use consistent periods.

**Good !**

# Be Consistent

- ✓ Differences draw attention
- ❖ Differences may imply importance
- Use surprises to attract not distract
- @ Do or don't, but use consistent periods.

**Not Good !**

# Be Consistent

- Differences draw attention
- Differences may imply importance
- Use surprises to attract not distract
- Do or don't, but use consistent periods.

**Helpful Difference**

# Is It Legible?

## ■ Rough Rule:

- You Should Be Able To Read  
Computer Screen From a Distance of  
8 x Width Of Slide
- Usually this is about 2 meters

# Line Transitions

## ■ Lines

- Use same style throughout
- “wipe” left to right
- Subdue previous bullet to emphasize next one



# Simple Slide Transition

- Fancy transition is annoying, not enhancing
- Again, be consistent
- I prefer none or "Appear" and "Disappear"

# Slide Design

## ■ Self Evident Rule

- Slide should not need explanation

## ■ Include only necessary information

- Is your research a key teaching point?

## ■ Avoid data-you-to-death (or sleep) slides

## ■ No more than 2 graphics / slide

- graphs should not show too much detail

# Keep Text Content Simple

Recognizing that discovery and innovation in basic, translational and clinical biomedical Research form the foundation of excellence and pre-e **Too Much!** ation and health care, the faculty and leadership of the School of Medicine (SOM) have embraced the goal of achieving national and international status as a leading biomedical research institution over the next decade.

# Keep Text Content Simple

- Our goal:
  - National/international status as leading biomedical research institution
- Our Foundation:
  - Basic, **Much Simpler** research
- Our Result:
  - Excellence in Medical Education

# Tables and Graphs

**Table 2.** Characteristics of Residents With Advanced Dementia and Their Associations With 6-Month Mortality in the Derivation Cohort (n = 6799)

Characteristic	No. (%) of Residents	Unadjusted HR (95% CI)
<b>Demographic</b>		
Age >83 years, median	3075 (45.2)	1.5 (1.4-1.7)
Male sex	2257 (33.2)	1.8 (1.6-1.9)
Nonwhite race/ethnicity	1366 (20.1)	1.2 (1.1-1.4)
<b>Functional status</b>		
Activities of daily living score = 28*	1747 (25.7)	2.5 (2.3-2.8)
Bedfast	523 (7.7)	2.6 (2.3-3.0)
<b>Diagnosis</b>		
Diabetes mellitus	1113 (16.4)	1.4 (1.2-1.5)
Congestive heart failure	958 (14.1)	2.1 (1.9-2.3)
Asthma or emphysema/COPD	520 (7.6)	1.6 (1.4-1.8)
Cancer		1.8 (1.8-2.4)
Pneumonia		1.6 (1.6-2.0)
Infectious		
Cardiac disease		1.2 (1.2-1.6)
Any fracture		0.9 (0.9-1.2)
Urinary tract		1.1 (1.1-1.4)
Septicemia		1.2 (1.2-2.7)
<b>Other health conditions</b>		
Edema	1155 (17.0)	1.5 (1.3-1.7)
Hallucinations or delusions	181 (2.7)	1.0 (0.7-1.3)
Aspiration	107 (1.6)	2.1 (1.6-2.8)
Bowel incontinence	5334 (78.4)	2.3 (2.0-2.7)
Recent weight loss	1074 (15.8)	1.9 (1.7-2.1)
Dehydration	370 (5.4)	1.7 (1.4-2.0)
Insufficient fluid intake	742 (10.9)	1.6 (1.4-1.8)
Fever	533 (7.8)	2.1 (1.8-2.4)
Pressure ulcers	1159 (17.0)	1.7 (1.5-1.9)
Shortness of breath	240 (3.5)	3.6 (3.0-4.3)
Unstable medical conditions	1626 (23.9)	1.9 (1.8-2.1)
Chewing or swallowing problem	2331 (34.3)	1.8 (1.6-1.9)
<25% of food eaten at most meals	2458 (36.2)	1.5 (1.4-1.6)
Not awake most of day	474 (7.0)	2.1 (1.8-2.4)
Body mass index <21, median†	3404 (50.1)	1.4 (1.3-1.5)
Oxygen therapy in prior 14 days	565 (8.3)	3.1 (2.7-3.5)

Too detailed

# Tables and Graphs

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Asthma or emphysema/COPD	520 (7.6)	1.6 (1.4-1.8)
Cancer		1.8-2.4)
Pneumonia or infection		1.6-2.0)
Cardiac dysrhythmia		1.2-1.6)
Any fracture in prior 6 months		1.9-1.2)
Urinary tract infection		1.1-1.4)
Septicemia		1.2-2.7)
<b>Other health conditions</b>		
Edema		1.3-1.7)
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**Highlight to draw attention**



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**or crop what you  
don't need**

# How Much on One Slide?

- One Major Point Per Slide
- One Basic Thought Per Line
- 7x7 Rule: No more than 7 lines of 7 words each
- Not Every Word Need Be On Slide
  - “The” can usually be deleted
  - Expand orally on basic written concept



# How Many Slides?

- Rough Rule:

No More Than 1 Slide Per Minute  
Of Talk

# Laser basics

- Use sparingly – Not a light show!
- Guide audience
- Move pointer to item of interest
  - Keep it there or move completely off screen
  - No circling



# Style

- Find your style own but:
- A really good talk is performance art
- Be Enthusiastic
  - If you don't care why should they?
- Be Case-Based

# Animation?

- SOME LIKE IT
- **MOST DO NOT**

# Content

- Teach to the ABIM test
  - Your research is cool
  - That new paper is cool
  - But will it be on board exam?
- Review talk with someone who took test recently
  - Fellows are great for this!
- Humor helps only if it reinforces teaching

# Content

- Consider making a second version for book
- Put detail you don't have time for there
- Put figures that need some pondering there

# Spell Check

- Spell check is your FREIND!

# Ways to lose interest

- Reading slides
- Monotony
- Wordy slides
- Speaker is bored
- Poor timing



# Ways to lose interest

- Instead of: " I know you can't read this but. . . ."
- Try this: "Let me direct your attention to this. . ."

Know Your Talk

**PRACTICE!**

# Summary

- Keys to success
  - Big
  - Simple
  - Clear
  - Relevant
  - Fun