

## Public Speaking for the Healthcare Profession

Slutsky J and Baum NH\*

Neil Baum Urology, USA

### Short Communication

“People’s number one fear is public speaking. Number two is death. This means to the average person, if you go to a funeral, you’re better off in the casket than doing the eulogy.”- Jerry Seinfeld

It is true that most doctors do not enjoy public speaking. Most physicians are comfortable with one-to-one conversations with patients; however, physicians are out of their comfort zone when it comes to speaking in front of other physicians, colleagues and even lay men and women. This article will discuss the preparation, the presentation, and what you need to do after the program is over to become an effective public speaker.

Most doctors and healthcare professionals pride themselves as good communicators. After all, that is how we take a history and then discuss our findings with our patients and then provide them with advice for restoring or maintaining their health. Except for bedside presentations to faculty or a presentation at grand rounds, we have received little training on public speaking. Except for those doctors who have had formal media training, few of us are able or comfortable in front of the T.V. camera. For the most part, public speaking is a learned skill and with just a little practice and preparation all of us can become good or even excellent public speakers. As a result, we can learn how to make a presentation in front of peers, before lay audiences and not panic when we are in front of the T.V. camera. This article is intended to provide you with tips and techniques to enhance your public speaking skills.

### Speaking before your peers

Many of you will have attended a speaker training program sponsored by a pharmaceutical company or a medical manufacturing company. Pharmaceutical companies will make available a slide deck of PowerPoint slides and review with you the salient points that they would like for you to cover during your presentation to a group of your peers. Because of Pharma guidelines, you will be asked not to deviate from the slides you were provided. This usually means that you will not be allowed to delete slides and not be able to add your own slides if you are speaking at a program that is sponsored or supported by the pharmaceutical company. But these restrictions need not limit your creativity and ability to make a compelling presentation that will educate your peers and make you a requested speaker on behalf of your sponsoring company.

The evening or dinner program with 10-15 of your peers is one of the most common examples of public speaking. This is one public speaking program that nearly all of us has or will have an opportunity to participate in. This will usually be industry sponsored and you will use the slide deck provided to you by the pharmaceutical company or the medical manufacturer whose product you are discussing.

There are three areas that are important to discuss and they are 1) Before the program, 2) The actual dinner program and finally 3) After the program is over.

### Before the program

You need to know and review your slide material thoroughly. It is important that you understand every slide in the slide deck and that you are comfortable with the material on the slide. I have found that the best speakers are so comfortable with the slides that they can discuss the slide without having to look at the slide. You want to avoid reading from the slides. Reading from the slides results in breeding boredom and loss of interest on the part of the audience. If you are looking at the slides, you are not looking at the audience and you will lose your ability to connect with the audience. The best speakers who want to connect with their audiences practice and rehearse their presentations. The experts never “wing” it. Your audience will be able to tell immediately if you took the slide deck directly from the CD and loaded it into a computer and are giving the talk for the first time.

We suggest that you rehearse your talk several times out loud with all the props, and audio-visual equipment you plan to use. This kind of pre-program practice will help to control the filler words such as and “a” and “um”. It is helpful to practice your slide transitions, your pauses and even your breathing. You also need to know how long the program is to last, and how long you are to speak. The experts never go beyond their allotted time. We suggest that you practice with a timer and be certain that you do not exceed the allocated time. I have also found that most dinner meetings don’t start on time as doctors are often delayed at arriving for dinner meetings during the week because of unexpected events that occur in the practice. As a result, you may have to shorten your program so you need to allow time for the unexpected.

If you are speaking at a restaurant, then you want to ask the meeting planner to request a private room. There are so many distractions if you speak in a restaurant with other diners near your program. Also, one of us (NHB) is an urologist and the slides and topics discussed at a venue that allows non-physicians to watch the slides and hear the program is not conducive to a venue that will endear you to the other guests and the owner of the restaurant.

### Audio-visual requirements

Before the program communicate with the pharmaceutical representative or the meeting planner. Find out if they will provide the computer, the projector and the screen. If not, let them know what you will bring and what kind of a computer you have and make sure it is compatible with the projector. If you have a MAC you will need an Apple adapter which is

different than the standard PC adapter. One of us (NHB) found this out when a MAC computer didn't have a cable to connect to the LCD projector that was PC compatible. Also, you will probably not require a microphone for a small group, but if you are speaking in a loud restaurant, a microphone may be helpful. It is highly recommended that you are the first to arrive at the program. This way you can be sure that the computers, LCD project, screen placement, and seating are all in order before the program. Nothing can side track a speaker, even the best seasoned speaker, if he/she finds that there is a problem with the computer or the equipment and that your flash drive with a USB port does not load into the pharmaceutical representative's computer or that your program created on a MAC computer does not "translate" on the representative's PC.

When you are one of the first to arrive, you can greet some of the physician audience members as they arrive. It is far easier to speak to a group of friends than to strangers. Also, if you can remember their names, you can call on them and ask their opinion or how they might manage a patient in their practice with the condition you are discussing. You might suggest that the meeting planner have name tags and ask the group to place the name tag on their clothing when they enter the venue. We have found that an interactive presentation between the speaker and the audience is the most enjoyable for the audience and the speaker.

It is a good idea to find out the agenda from the pharmaceutical representative before the program. Are you speaking before the meal, which we believe is the least favourable idea as you are almost holding the doctors hostage to hear the program before they can eat, during the meal, or after the meal? My preference is to speak after the appetizer is served and the orders have been taken by the wait staff. This way the doctors have some food as well as some alcohol and they are not starving. You can tell the waiters that they won't be disturbing you and, if possible, they should avoid walking in front of the projector. Ideally, you should end before the desert arrives and can use this time to conduct the questions and answer session. It is a good idea to ask the pharmaceutical representative what are their goals and objectives for the program and make certain that you can deliver on his/her requests.

It is a good idea to prepare a handout for the program. We suggest that you do not distribute the handout before the program as you want your audience to focus on you, the speaker, and your slides and not on the handout. Tell the audience that you will be providing a handout of your presentation at the end of the program so that they will not waste time taking notes during your presentation.

## Prepare an Introduction

You need to prepare an introduction. We suggest you write your own introduction and send a copy by E-mail to the person who will be introducing you. Tell the introducer that you are providing them with the introduction as a "suggestion" and that they are welcome to modify it if they wish. We have found that the majority of introducers or meeting planners are delighted to have the introduction prepared for them and will use it just as you have written it. It is a good idea to bring a hard copy as you can be sure that many of the introducers will not have downloaded a copy and will not have remembered to

bring it with them. Figure 1 is an example of the introduction that one of us (NHB) uses and you are welcome to modify it.

### Neil Baum Bio and Introduction

Dr. Neil Baum is an urologist in private practice in New Orleans, Louisiana. He is on the clinical faculty of both Tulane and LSU. For 10 years he wrote the popular column, "Marketing Dynamics" in *American Medical News*. For 15 years he has written the marketing column, "Bottom Line" for *Urology Times*. He is the author of *Marketing Your Clinical Practice-Ethically, Effectively, and Economically*. This book has sold over 175,000 copies and has been translated into Spanish. His presentations are famous for providing practical ideas that each member of the audience can easily and inexpensively implement into their practices to increase the services that you offer your patients.

Dr. Baum is also an amateur magician and usually includes at least one special effect in his presentations.

His talk today is also the title of his new book, *Improving the Profitability and Productivity of Your Practice*. Please help me welcome Dr. Neil Baum.

### Figure 1: Neil Baum bio and introduction.

## Show time-getting ready

Public speakers like an athlete have to get ready and prepare for the program.

a. If you're a woman wearing high heels, take them off. Now, stand on one leg and shake the other. When you put your foot back on the ground it's going to feel lighter than the other one. Now, switch legs and shake. You want your energy to go through the floor and out of your head. This sounds quite cosmic; it isn't. It's a practical technique used by actors.

b. Shake your hands...fast. Hold them above your head, bending at the wrist and elbow and then bring your hands back down. This will make your hand movements more natural.

c. Warm up your face muscles by chewing in a highly exaggerated way. Do shoulder and neck rolls. Imagine that you are at eye level with a clock. As you look at 12, pull as much of your face up to 12 as you can; now move it to 3, then down to 6 and finally over to 9.

All of these exercises serve to warm you up and relax you. Those exaggerated movements make it easier for your movements to flow more naturally once you start your program. Preparation is a key element to making a solid presentation. Here are a few tips that will help you make an effective presentation.

## The opening

Psychologists have proven that the first and last 30 seconds of any speech have the most impact, so give the open and close of your talk a little extra thought, time and effort. Do not open with "Ladies and Gentlemen, it is a pleasure to be here tonight." It's wasting too much of those precious 30 seconds.

Opening a speech with a joke or funny story is the conventional wisdom. Before you do, ask yourself these questions:

- \* Is it appropriate to the occasion, or for this audience?
- \* Is it in good taste?
- \* Does it relate to me (my service) or the event or the group?
- \* Does it support your topic or its key points?

Humorous stories, an inspirational vignette, which relate to your topic or audience, are sure ways to get an audience's attention. However, it may take more presentation skill than you possess in the beginning of your speaking career. It's safer and more effective to give the audience what you know and what makes you the person to present the material.

A good way to open your speech is by giving the audience the information they most want to hear. By now, you know the questions you hear most at a cocktail reception or professional society meeting. Well, put the answers to those questions in your speech.

A scientist with Genentech was preparing a speech for a woman's group. Since most of the audience didn't know what scientists are like or what they do, he told them what it was like to be a scientist. "Being a scientist is like doing a jigsaw puzzle in a snowstorm at night...you don't have all the pieces...and you don't have the picture to work from." You really can say more with less.

### **The closing**

The close should be one of the highlights of your speech. This is the moment you have to motivate your audience to take action on your material and your program. Summarize the key elements to your presentation; i.e., overview of common medical problems, prevention, treatments, etc. If you're going to take questions, say, "Before my closing remarks, are there any questions?" Finish with something inspirational that ties into your theme.

The Genentech scientist told of the frustrations of being a scientist and he closed by saying, "People often ask, 'why should anyone want to be a scientist?'" His closing story told of a particularly information-intensive medical conference he attended. The final speaker of the day opened with, "I am a 32-year-old wife and mother of two. I have AIDS. Please work fast," she said to the scientists. He got a standing ovation for the speech. (From *Public Speaking for Podiatrists, Podiatry Management*, Patricia Fripp).

### **Summary**

Public speaking is one of the best ways to market and promote your skills as a physician. It is an ethical way of communicating with your peers and an opportunity to show case your speaking skills and your areas of interest or expertise. It all begins with conscientious preparation. Now that we have reviewed the preparation, let's look at the details of the actual program.

### **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. You will 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 pharmaceutical representative, 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 prostate cancer might begin with "There are 26,000 deaths each year from prostate

cancer. To give you an idea of how many people that is, can you imagine one-third of the capacity of the Louisiana Superdome dying each year from a disease that can be detected and cured with an annual rectal exam and a PSA blood test?"

I suggest that you avoid clichés such as "I'm delighted to be here." One exception would be if you can make that cliché humorous. For example, if one of us (NHB) from New Orleans, Louisiana is presenting in the northern part of the country in the summer months, he might begin by saying, "Most speakers 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 with your topic, that is a great way of connecting with your audience and capturing their attention. For example, if one of us (NHB) is giving a talk on practice management and practice efficiency, he might tell the story of when he was called from a room three times to answer "emergency" phone calls from a patient who, when I got on the phone with him, only requested his medical records. He might talk about how devastated he was and how he subsequently put in place a system, which he described to the audience that ensured this, would never happen again.

Another technique to gain the attention of the audience is promising the audience 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. NHB promises to show them how they can increase the number of patients seen by just one patient an hour and how this results in an increase of nearly 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 the self-interests of the audience. We refer to this opening as tuning into Station WIIFM or What's In It For Me!

We highly recommend that you avoid beginning your program with an apology. Don't mention to the audience the problems with the audio-visual equipment or the reason that you are late for the program. The audience doesn't care about these issues 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 front of the audience.

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. This is a turn off to audiences. Instead, we suggest you begin by say, "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 speak and that you will take questions during or at the end of the program. If the audience is small, i.e. less than 20,

we will often encourage the audience to ask questions during the program and not wait until the end. We find this a more conversational method of speaking as it generates more questions from the audience. Our preference is to speak while the audience is eating and we usually start after the waiters have taken the orders and the audience has had their appetizers. We state that we will finish the program by the time they are ready for their desert. We also mention that a handout will 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**

I suggest that you 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 or tell them what you just told them. So, we begin with the goals and objectives that we want to discuss during the program. This is 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, we can still begin by telling the audience what we want to accomplish during the program. For example, a talk on the treatment of androgen deficiency in men with localized prostate cancer might mention: 1) the history of testosterone in men with prostate cancer, 2) what men qualify for androgen supplements, and 3) how to monitor the prostate cancer patient who receives hormone replacement therapy.

One of us (NHB) likes to begin a clinical program with a case history. He tells about one of his patients who had the specific problem and how he used the drug, treatment or device to manage the case. He tries to select a patient who is very similar to patients who would be seen by members of the audience.

He then goes through the slides exactly 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. NHB makes an effort to find one salient point on each slide and focus their 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 he can use the laser pointer to focus their 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 NHB will ask a question, tell a story, or ask the audience a question. For example, during a program on practice management, he will relate a story about an unhappy patient and then ask a doctor 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, for an interactive program, and will engage and involve your audience.

It has been our observation that few physician speakers make use of visual aids during their program. They tend to rely heavily upon their slides. We suggest that you can keep the audience attention focused on you if you make use of visual aids. For example, if one of us (NHB) is speaking about

urinary incontinence, he will use a balloon to demonstrate the bladder and the urethra. (He hasn't figured out how to avoid the sound of flatus when I allow the balloon to deflate!)

Studies have repeatedly shown that there are more nerve endings from the eye to the brain than 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 than from auditory ones. The Japanese proverb is true that one seeing is better than 100 times telling!

## **A few suggestions regarding the use of visual aids**

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. I usually keep my visual aid under the table that supports my computer and the projector.

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

3. Do not handout 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.

We suggest reiterating the three 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 desert is served. Again, state the three objectives and how they might pertain to their patients and their practices. 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 the question. (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 answering the question, direct your attention to the person who asked the question. Then spend 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, I have often used the 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 version 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. I recall giving a program to large pharmaceutical audience. One of us (NHB) put up a slide from *The Economist* that showed two camels in the mating position. My closing line was that pharmaceutical reps need to “hump to it” and get involved with their physicians and be value-added when it comes to their details with physicians. The meeting planner spoke to me afterwards and told me that he would never hire me again because of that comment. He said I had a great program, great material, and a good connection with the audience but this slide was over the top. He learned his lesson and made a promise to never use material that could potentially offend anyone in the audience. If you want to use humor, use self-deprecating humor as it is always the safest.

We then suggest that you wrap up with your summary statement. This is your take home message that you want each member of the audience 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 speaker 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 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.

Public speaking is like choreography. You have to manage the program before and during the presentation.

You Are Not Done Yet-Action need to be taken after the program is over.

You aren’t done after the speaker has finished and sits down.

It is after the program is over that you have a chance to mingle with the audience and you, the speaker, to get to know the audience and, more importantly, allow the audience to have an opportunity to get to know you. Many pharmaceutical representatives start putting away their computers and disconnecting the audio-visual 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. We suggest that you take the names of the doctors and make notes and follow up with a personal letter and include an article(s) that your company allows you to distribute to the doctors. For example, if NHB is giving a program on the medical management of BPH and after the program a doctor asks about guidelines for PSA testing in older men, you might consider sending them a note and an article from the American Cancer Society on the topic. It’s true that few physicians will read the entire article. So, we suggest that you use a yellow highlighter for the one or two sentences in the article that mentions PSA testing in older men. You can place a Post It note on the front page of the article directing the doctor’s attention to the page that has the answer to his question. 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 I think 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 contains name, address, phone numbers, e-mail, and Web address.

### **Asking for feedback**

We suggest speaking with the meeting planner and ask them what they thought of the program. You might ask for constructive criticism and ask how you might have made the program better. Consider asking if you were got across the most important points about the product or their device.

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 that was presented going to change your prescribing habits?

Would you like the pharmaceutical representative to contact you about the product or to obtain samples of the medication? This last question is very useful as an affirmative response gives you positive feedback about the program and also a request for a visit from the pharmaceutical representative to the doctor’s office. 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 foot care product or certificate for service--a free exam, etc.) and ask that everyone drop their business cards 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.

Finally, we suggest that you send a thank you note to the speaker thanking them for the invitation and offer to provide any additional information that they might want for their doctors' practices.

## 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. Good luck: you can do it!

## About Neil Baum, M.D.

Dr. Neil Baum is an urologist in private practice in New Orleans, Louisiana. He is on the clinical faculty of both Tulane and LSU. For 10 years he wrote the popular column, "Marketing Dynamics" in *American Medical News*. For 15 years he has written the marketing column, "Bottom Line" for *Urology Times*. He is the author of *Marketing Your Clinical Practice-Ethically, Effectively, and Economically*. This book has sold over 175,000 copies and has been translated into Spanish. His presentations are famous for providing practical ideas that each member of the audience can easily and inexpensively implement into their practices to increase the services that you offer your patients. Dr. Baum is also an amateur magician and usually includes at least one special effect in his presentations.

## About Jeff Slutsky

With a background in both advertising and public relations, Jeff Slutsky had an opportunity to practice what he preached when he became part owner of a night club and later a health club. With the marketing dollars now coming out of his own pocket, he soon began to discover and develop result-oriented, low-cost tactics to build sales.

His grassroots marketing program has received a great deal of national media attention including *The Wall Street Journal*, *USA Today*, *Inc Magazine*, and *CNN*. Jeff has presented and consulted with many organizations including AT&T, American Express, Chevron, Walt Disney, Pizza Hut, Honda, Sony, Goodyear, The US Army, Marvel Entertainment and McDonald's.

He's the founder of Street Fighter Marketing which specializes in teaching businesses how to market, promote and increase sales on a shoe-string budget. He has authored and published 10 books including *Street Fighter Marketing Solutions*. Plus, he's produced three audio albums and six video training programs. But his most successful production to date... Is the birth of his triplets. For more information about Jeff Slutsky's speaking contact: 800-758-8759 (800-SLUTSKY).

Web and video demo: [www.StreetFighterMarketing.com](http://www.StreetFighterMarketing.com)  
E-mail: [gina@StreetFighterMarketing.com](mailto:gina@StreetFighterMarketing.com)

Available at the CreateSpace eStore:  
<https://www.createspace.com/7178966>. (Save \$3.00 with discount code: YS5R5GYX).

**\*Corresponding author:** Neil H Baum, M.D, Neil Baum Urology, [www.NeilBaum.com](http://www.NeilBaum.com), Tel: 504-891-8454; Email: [doctorwhiz@gmail.com](mailto:doctorwhiz@gmail.com)

**Received date:** June 24, 2017; **Accepted date:** July 08, 2017;  
**Published date:** July 24, 2017

**Citation:** Slutsky J, Baum NH (2017) Public Speaking for the Healthcare Profession. *J Health Sci Educ* 1(2): 110.

**Copyright:** Slutsky J, Baum NH (2017) Public Speaking for the Healthcare Profession. *J Health Sci Educ* 1: 110.