

Proposal Presentation: Guide

Foundations of Clinical Research · Level 1: From Clinical Question to Publication

Organisation: Neudata ([#ClearDataClearImpact](#))

When: Session 8 (Week 8, Saturday, online, 19:30 to 22:30), the 45-minute presentation block after "Be the reviewer"

Who presents: about 5 volunteers. **Everyone** prepares and submits the 6 slides, whether they present or not.

Format: **6 minutes, 6 slides** on your own research proposal and publication plan, shared on your screen, then **2 minutes** of feedback

Content: your research proposal (individual product 1, your own question). The FLUID-ICU manuscript is not presented.

Marked with: the presentation section of [Proposal_Rubric.pdf](#) (criteria 12 to 16), for presenters only. Non-presenters are scored on the written proposal, scaled to 100.

0. How the 45 minutes are used

Part	Time	What
Volunteer presentations	5 presenters × (6 min + 2 min feedback) = 40 min	Proposal and publication plan on the presenter's own question (sections 1 to 4 below)
Closing round	5 min	The instructor sums up common strengths and common problems seen in the submitted proposals and slides, and reminds everyone of the manuscript and peer-review deadlines
Total	45 min	Followed directly by the post-course quiz in the last 15 minutes of Session 8

Choosing presenters. Volunteers tell the course lead by the Wednesday before Session 8. If more than 5 volunteer, the course lead picks 5 that show a range of designs and professions and lets the others know. If fewer volunteer, the instructor may invite participants whose proposals would be useful for the class to see.

1. The six slides (everyone)

One slide is about one minute. Slide 1 is quick, which leaves a little extra time for slides 3 and 4.

Slide	Title	What to show	Time
1	Title & presenter	Working title; your name, profession and department; one photo or icon of the clinical problem (optional).	0:20
2	Problem & PICO	The problem in one sentence with one number (how common or how serious); the PICO as a 4-row table; the research question; the hypothesis.	1:00
3	Design & participants	Design and why; setting; key inclusion/exclusion criteria; a simple flow picture (eligible, enrolled, groups compared, outcome); the main bias and how you reduce it.	1:15
4	Data & analysis plan	Primary outcome (how and when measured); 4 to 6 key variables with types; how data are captured and checked; sample size statement; which summary and which test or model; how you will handle missing data.	1:15
5	Ethics & feasibility	Consent approach; registration; confidentiality; a simple timeline (Gantt bar); expected recruitment per month; the biggest practical risk and your plan for it.	1:00
6	Publication plan & impact	Target journal and the reporting guideline you will follow; working title; planned authors (roles are enough) with their CRediT roles; one line of the abstract skeleton (e.g. the Conclusion you would write for each possible result); what will change for patients or the department.	1:10
		Total	6:00

Use the course slide template if one is provided, or any plain template with a light background and dark text. Submit the slides with your written proposal (see [Proposal_Brief.pdf](#)).

2. Tips for a good presentation

Content

- **One message per slide.** The slide title can be the message ("A cohort study is the realistic design here").
- **Maximum ~6 short lines** per slide, at least 24-point font. Many people watch on a laptop or phone: if you need to read it, they cannot.
- **Pictures before words.** A PICO table, a flow diagram and a timeline bar are clearer than paragraphs.
- **Numbers with units and sources** ("about 40 septic shock admissions per year, unit register").
- **Be honest about weaknesses.** Naming your main bias and limitation scores marks. Hiding it loses them.
- **Use calibrated language** on slide 6: an observational study can show an *association*, not prove a cause.
- Make sure the slides match the written proposal (same question, same primary outcome, same sample size, same working title).

Delivery (online)

- Rehearse at least twice **with a timer**. Six minutes is short, and most presenters overrun on slide 2. Keep the background brief.

- Look at the camera, not only at your slides. Point to the one thing on the slide that matters (use the cursor or the annotation tool).
- Avoid jargon you could not explain to a new colleague. Plain language is a strength.
- Prepare for three likely questions: "Why this design?", "Can you really recruit that many patients?" and "Why this journal?"

Technical

- Send the file to the course lead before Session 8 (see [Proposal_Brief.pdf](#)). The course lead keeps a copy and can share it for you if your connection fails.
- Join 10 minutes early on the day to test screen sharing, microphone and camera. Use a headset if you can, and a quiet room.
- Do not embed videos. Close other programs and notifications before you share your screen.
- Check that tables and the Gantt chart are readable on a laptop screen.

3. Timekeeping

The instructor (or a co-instructor) keeps time and posts short time signals in the chat (and says them aloud if needed).

Signal	Posted at	Meaning
"2 min"	4:00	2 minutes left. You should be on slide 5.
"1 min"	5:00	1 minute left. Move to your final slide.
"Time"	6:00	Time is up. Finish your sentence and stop.

At **6:30** the chair stops the presentation politely, even mid-slide. Keeping to time is part of the rubric and protects the feedback time of every presenter, because the whole block has no spare minutes.

4. Two-minute feedback format

Feedback is short, specific and kind. It follows the same pattern for every presenter.

Time	Who	What
0:00 to 0:45	The class , in the chat	Two stars and a wish: participants type two specific things that were strong and one specific suggestion. The instructor reads out one or two.
0:45 to 1:45	Instructor	One strength, the most important improvement for the written proposal or publication plan (usually design, outcome definition, feasibility or choice of journal/guideline), and one question if time allows.
1:45 to 2:00	Presenter	One-sentence reply or "thank you, I will take that on board". No defending.

Written feedback: during each presentation the instructor fills in the one-page feedback form at the end of [Proposal_Rubric.pdf](#). The instructor saves the chat after the block and sends each presenter

their form and the class comments by email after the session, so they can use them when revising the written proposal.

Good feedback is specific ("your exclusion criteria would remove most elderly patients") rather than general ("good job"), about the proposal rather than the person, and actionable ("add the time point to your primary outcome").

5. What about the manuscript?

The FLUID-ICU manuscript is not presented in Session 8. Each participant finishes their own draft as homework, and feedback comes through the individual peer review ([Peer_Review_Instructions.pdf](#)) and the instructor's marking ([Manuscript_Rubric.pdf](#)).