

Michigan Research Day XXXIX

Oral Presentation

Title of Presentation:

Presenter:

Presenter Category:

- Student: Medical/Nursing/Graduate
- Resident Physician
- Fellow
- Practitioner: Physician/Physician Assistant, Nurse/Nurse Practitioner, Faculty or Teacher

Directions: Please place comments under each factor. Use this scale for scoring presentations:

0=Unacceptable; 1=Poor; 2=Satisfactory; 3=Good; 4=Outstanding

Factors

Score x Weight = Weighted Score

Topic Selection

Significance to Primary Care _____ X 5 = _____

Originality of research..... _____ X 2 = _____

Quality of Research

Soundness of research methods..... _____ X 7 = _____

Validity of conclusions..... _____ X 6 = _____

Quality of Presentation

Clarity and flow of presentation..... _____ X 4 = _____

Proper use of audiovisual aid..... _____ X 1 = _____

Total Score..... = _____

(100 possible)

Penalty (*Oral presentations exceeding ten minutes- minus five points*) - _____

Total Score..... = _____

Next step suggestions to presenter:

This form is used to assist the reviewers in providing feedback to the presenters regarding the research presentations provided; however, reviewers are not bound by these scores in determining awards.

Judge: _____