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ABSTRACT

Table clinics, or short oral presentations on techniques related to some phase of research, diagnosis, or treatment, can be used to enrich allied health education. To present a table clinic, students must choose a topic which lends itself to a 5- to 7-minute presentation and which imparts knowledge that participants can take back to their workplace and implement with minimum cost and effort. After choosing a topic, students must review the literature on the topic to determine its usefulness and to help narrow it. Students must then research further, either performing their own investigations or using approximately three to four sources. Once the research has been organized, a script must be developed that has both valid, reliable content and grammatical correctness. Next, students must select the format of the clinic, which will include live demonstrations, poster board presentations and discussion, or combinations of different types of media. Preparing the display board provides students the opportunity to interact, allowing them to assist each other with the development of the board. Finally, presentation of the clinic should be concise, but students should not memorize the presentation to maintain the informal, interactive nature of the clinic. Examples are drawn from the field of dental education. (MAB)

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**TABLE CLINICS:
A VALUABLE LEARNING EXPERIENCE
FOR
ALLIED HEALTH STUDENTS**

National Institute for Staff and Organizational Development

Austin, Texas

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**TABLE CLINICS:
A VALUABLE LEARNING EXPERIENCE FOR ALLIED HEALTH STUDENTS**

I. INTRODUCTION

For over a century, dedicated dental practitioners have shared their knowledge and skills for the advancement of the profession through table clinics. They seem to have taken to heart the words of Dr. Israel Shulman: "Knowledge, self-contained is of great worth. Knowledge, disseminated, is priceless."

These table-top demonstrations probably developed from the apprentice-craftsman approach to learning since precursors of today's dentists were barbers and silversmiths who learned by watching and imitating. Records in old journals indicate that budding dental societies held their meetings in the office of a member who would invite colleagues to gather around the dental chair to observe a live demonstration during the meeting.

Later it became the custom to devote an entire meeting to table-top demonstrations with members moving from one table to another to choose and to learn from the topics of greatest interest to them. Still today hygienists, dental assistants, and students in each of these three branches of the profession eagerly attend these sessions or willingly present clinics at gatherings of their respective organizations.

Like the Everyready bunny, table clinics have stood the test of time in the dental profession and have not been displaced by the sophisticated media of the present information era. Therefore, I am convinced that other allied health students (and professionals) could benefit from table clinics if someone would accept Dr. Shulman's challenge to "disseminate the knowledge." I have accepted his challenge and am delighted to share with you the *WWHWW* of *TABLE CLINICS*.

II. WHAT?

A Table Clinic is not an essay, lecture, or exhibit but, rather a succinct oral presentation of a technique or procedure concerned with some phase of (dental) research, diagnosis, or treatment. The presentation is supplemented by visual aids such as a display of 3-D models, posters, slides, and/or demonstration with a table-top for a stage. In simplest terms, a Table Clinic is a professional show and tell.

SPECIFICATIONS FOR TABLE CLINICS

The following are specifications or "rules" for table clinics which we follow, although clinic regulations vary among sponsoring organizations -- some very strict, others lenient.

TIME: Table Clinics are time limited to approximately five minutes. Guidelines vary from a minimum of three to a maximum of seven minutes.

CLINICIANS: There may be one but no more than two clinicians per clinic; membership in the sponsoring organization is usually required.

SETTING: The setting is a large meeting room with one table for each clinic arranged around the periphery and space in the center for the attendees to move around from table to table. Each table is covered with a white cloth and serves as the stage for visuals and display board. The clinicians stand on either side or behind the table.

DRESS: Students wear official school uniforms and follow professional guidelines for make-up, hair, and jewelry. Some sponsors do not require uniforms.

TITLE: The title of the clinic which is generally on the display board should accurately reflect the subject or idea being presented.

SOUND DEVICES: Sound devices are prohibited.

BRAND NAMES: Brand names or manufacturer's names on materials or items must be concealed.

FORMAT: Traditionally, participants are free to roam from table to table, pausing to listen to the clinics of particular interest. Thus, clinicians repeat the presentation over and over, like a reel-to-reel tape, as long as anyone is standing in front of the table to listen. However, some associations have changed the format to one in which attendees are seated auditorium-style and clinics are presented one after the other from assigned places around the room. The traditional format lends itself more effectively to demonstration type clinics.

III. WHY?

The *Alumni Association for Student Clinicians* of the American Dental Association purports that "the most valid and lasting reward for presenting a table clinic is the knowledge that you (as clinician) and others gain from the presentation." In addition to the knowledge that is gained and shared by clinicians, these students have the opportunity to interact with members of their future profession on a local, state, or national level. This type of contact fosters *networking* between members and future members of a chosen field. Further, individuals who are exposed to a professional organization while students are more likely to become involved after graduation in the growth and development opportunities offered by these groups. In addition to the *professional growth* and networking, students benefit from table clinics through a variety of learning experiences that develop practical job-related skills. For example, students preparing table clinics gain experience in, at least, the following:

- (1) Developing Ideas/Brainstorming
 - (2) Decision Making
 - (3) Research
 - (4) Organizing Material
 - (5) Teamwork/Conflict Resolution
 - (6) Professional Communication
- (7) Creating Visual Displays
 - (8) Technical Writing
 - (9) Public Speaking
 - (10) Accepting Criticism
 - (11) Building Self-Esteem
 - (12) Joy of Accomplishment

Since most students clinic in pairs, the give-and-take of teamwork and positive conflict resolution offer practice in a skill that is essential for survival among health care workers. Additionally, both written and oral communication skills are enhanced as clinicians develop an idea, perform the necessary research, condense and organize the information into a format similar to that used by health professionals with patients and colleagues.

Creativity is cultivated as clinicians brainstorm for appropriate visual media to depict the main points of their topic. The tasks associated with developing the visual aids and making the display board enhance skills that have often lain dormant in students since grade school. Finally, seeing the results of their labors and receiving positive reinforcement from others increases the confidence and self-esteem of clinicians, win or lose. Winners often beam with pride over the first award of their lives.

IV. HOW?

Flow-Chart (attached)

- 1. *Choosing a Topic:*** There are numerous roads that lead to good table clinic topics. Students in every field of health care usually have one or two areas of particular interest about which they would like to know more. On the other hand, a student may have discovered a way of performing a task more efficiently, safely, and/or economically which he or she would like to share. Also, expanding the ideas of others or combining two ideas often leads to new knowledge while a unique problem presented by a patient and how the case was handled can be very informative to others. New products or techniques, or a new way to use an old product or technique, are additional roads to clinic topics. For example, I recently saw on TV a new type of zip-on cast for broken limbs. Application of the cast was demonstrated and the advantages and disadvantages of the cast and suitable patient characteristics were described. It was short, simple, and effective . . . just like a good table clinic. No matter what road students take in choosing a topic, it is important to remember that the primary goal of table clinics is to present something the participants can take back to their work place and implement tomorrow with minimum cost and effort and maximum benefit to patients and/or the profession.
- 2. *Literature Review:*** Once a tentative topic has been chosen, initial research helps students develop the topic. This early research also indicates whether the idea is "fresh" or "stale" and if it needs to be broadened or narrowed. Talking with professionals in the field to get their reactions on the topic is a great learning experience for students and enhances relations between the school and the community. The most common "fault" clinicians make is trying to present too much material. Table clinics are time-limited so that participants can gather key information on numerous topics in a short period of time. Therefore, it is essential to focus or concentrate on the most important facet(s) of the chosen topic.
- 3. *Research:*** Three or four sources are sufficient when researching for Table Clinics. Often students pick a topic or technique about which little has been written. In this case, we suggest that students interview professionals who are currently using the technique, gather data through a survey, or do their own research. A few years ago, one of our students began wondering if skipping breakfast had any effect on the digital dexterity of dental assistants. With classmates as volunteer subjects, the experiment was carried out, and data was presented in a table clinic.

4. ***Developing a Script:*** Once the research has been organized and condensed into written form, a script is developed. Working as a team, Allied Health faculty check the material for content validity and reliability while English faculty focus on grammatical correctness and organization. Student clinicians read their script aloud several times to determine "natural" breaks in the material for switching from one partner to the other.
5. ***Selecting the Format:*** Before visual aids are developed, clinicians must decide on a presentation format. For example, some students choose slides or poster boards and discussion, live demonstrations, or a combination of several media. The availability of time, support resources (such as equipment or technicians), and individual talents play an important role in format selection. At this stage, rough sketches of the display board and ideas that depict major points of the topic are helpful. Slides and photographs should be of excellent clarity and quality since most meeting rooms will be lighted. Remember, too, that use of electrical appliances such as slide projectors and overhead projectors mean that outlets must be available. Many kinds of 3-D models are available for health professionals to use although live models are forbidden. While slides and transparencies are excellent visuals, experience indicates that presentations of five minutes generally hold the attention of the audience, so the KISS rule aptly applies to table clinics. In the traditional methods of presenting table clinics where observers stand about a foot from the table, hands-on demonstrations are the most effective media.
6. ***Preparing the Display Board:*** Since the board is not the clinic but highlights main points or steps, students benefit from sketching various ideas for their display before selecting and cutting background covers, letters, and illustrations. In preparing the display, students often trade-off talents with classmates. For example, photography may be the hobby of one student while another may be talented in lettering. Graphics or media staff can be invaluable to students during this phase of preparation by instructing, critiquing, and loaning tools which result in neater, more attractive displays.
7. ***Presenting the Clinic:*** The oral presentation which is drawn from the written script should be simple, concise, and relevant. Maintaining eye-contact with the participants is extremely important, yet the use of reminder index cards during clinic sessions greatly reduces anxiety of presenters. A memorized script distracts from the informal nature of traditional clinics where participants often ask questions during the presentation.

V. WHEN?

The tasks involved in preparation and presentation of a table clinic are the major objectives of a required course in Communication Skills for dental assisting students. This course is taught by a member of the English faculty during spring (third) quarter of our four-quarter program, with "technical" assistance provided by Dental Assisting faculty.

VI. WHERE?

The course ending coincides with the Annual Session of the North Carolina Dental Assistants Association, the sponsor of Student Table Clinic competition. Students from dental assisting programs throughout the state are invited to the Table Clinic for competition; those who are not competing attend with members who earn CE credits. Judges for the state competition are chosen from dentists and officers of the sponsoring association, both state and national. An important criteria for selection of state judges is that the individual has no affiliation with a dental assisting program. Awards are presented at a luncheon following the clinic session. All clinicians receive a certificate of appreciation from the organization. The second and third place winners receive ribbon awards, while the first place clinic receives a plaque for each team member and one for their college.

Prior to state competition, a clinic session is held on-campus with judging by one or two dentists and/or dental assistants and one or two members of the English faculty. Members of the surrounding dental community and Allied Health students and faculty are invited to attend. If funds are available for all students to attend the state meeting, on-campus "judging" consists of providing constructive feedback to clinicians. If, however, funds are limited, judges select two clinics and two alternates to represent our college on the state level. Specific guidelines for judging clinics are attached.

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Alumni Association of Student Clinicians - American Dental Association. (1990). The Creative Clinician: A Student's Guide to the Preparation of Table Clinics. York, P.A.: Author.

Practical Demonstrations. (1968). British Dental Journal, 125(7), 285, 286.

Weed, Roger M. (1991). "Have You Given a Table Clinical Lately?" Texas Dental Journal, 108(2), 7-10.

TABLE CLINIC FLOW-CHART

Idea

Research

Script

Select & Develop Format

Posters

Slides

Models

Demonstration

Combination

Photos

Rehearse

Revise

Time

Present

STUDENT CLINICIAN PROGRAM RATING FORM

A table clinic is a demonstration, not an essay, lecture, or exhibit. It must be shown completely in no more than 5 to 7 minutes and must be repeated many times during the clinic period with opportunity for dialogue with attendees.

TITLE _____

CLINICIAN _____

ASSISTANCE

_____ Student prepared all materials used in clinic.

_____ % Assistance received from individuals.

_____ % Materials borrowed or purchased.

SUBJECT MATTER

	low				high
1. Important, timely, pertinent	1	3	5	7	9
2. Organization, logic, sequence	1	3	5	7	9
3. Practical approach to practice	1	3	5	7	9
4. Scientifically sound & supported	1	3	5	7	9
5. Creative ability, new approach	1	3	5	7	9

Total Points this Section _____

PRESENTATION

	low				high
1. Objectives & conclusion related	1	3	5	7	9
2. Thorough background knowledge	1	3	5	7	9
3. Story told completely	1	3	5	7	9
4. Clinic readily understood	1	3	5	7	9
5. Oral presentation brief/lucid	1	3	5	7	9
6. Presentation dignified/professional	1	3	5	7	9

Total Points this Section _____

TABLE DISPLAY

	low				high
1. Clinic is neat/attractive	1	3	5	7	9
2. Visuals well arranged, readable	1	3	5	7	9
3. Workmanship good	1	3	5	7	9
4. Handout available (synopsis)	1	3	5	7	9
5. Professional appearance	1	3	5	7	9
6. Creative ability	1	3	5	7	9

Total Points this Section _____

Comments _____

Judge _____ TOTAL POINTS _____

Maximum 99 Points