



Welsh Obstetric and Gynaecological Society

What is a good poster?

Instructions for contributors

1. What is a poster? A 'poster' is *not* an article which has been reduced in font size to fit the dimensions of the canvas. We see quite a few such examples which are very verbose, with the font so small that there is no hope of reading them during a busy conference. Delegates are supposed to read and digest your poster (among many others) during the refreshment breaks of a busy program.

Hence in effect, a poster is a '*bill-board*' – albeit a rather sophisticated and scientific one.

2. It should be printed as an A1 size and have a minimum font size of no smaller than 12.

3. *Pictures and diagrams* are very helpful. However too many may confuse the reader. Each one should be relevant and clearly labelled. They should complement the text and contribute to the message. A particular item of interest e.g. scan pictures should be indicated by an arrow (it may not be obvious to others, as it is to you).

4. It should have a *message*, which is clear. Language should be concise and to the point. Every phrase should be relevant and contribute to the message.

5. A *good* poster is one which inspires/educates/excites a large number of people (in the opinion of the judges) – i.e. has a high 'impact factor'. It should be *presented professionally* - check for spelling and grammatical errors.

6. Content: there is no restriction on the type of presentation, unless specified by the organisers. *Case reports*: are very common, probably because they are the easiest to do. Just because something is uncommon, it does not necessarily make a good case report. Your justification and learning point(s) should be clear.

Audits: also common, and are probably the most misused. An *internal* audit on an area, which has clearly established and accepted standards may be of interest to your own dept, but is of little interest to others. For an audit to win it should have a high '*generaliseability*' index.

Surveys: usually from questionnaires. Clinical relevance should be highlighted.

Clinical studies: less common. Implicitly have a higher value, because of the effort that has gone in to them. But the questions 'why, so what, what next' should be answered clearly.

Lab-based scientific studies: rare, but very welcome. Advances in clinical practice primarily arise from these, hence are very important to clinicians. However, the format and the language of science should be adapted (simplified) to a clinical audience. It is best if it is scripted with a clinical, rather than a scientific audience in mind. Hence the *clinical relevance* must be made clear.

Good luck!

Euan Kevelighan, Hon. Secretary

Makiya Ashraf, Hon. Treasurer

Last updated: March 2016