

Health Night with Dr. Schamma — Host Guide

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A complete 60-minute community health-literacy program. Free to host. No physician required in the room.

Created by **Dr. Schamma Salomon, MD, FACP** — board-certified in Internal Medicine, practicing Vascular Medicine in Texas. drschammaexplains.com/health-night

The one sentence that governs everything in this kit: Health Night is *health education*, not health care. You are teaching people how their bodies and their doctor visits work. You are never screening, diagnosing, advising, or treating anyone. If you hold that line, you cannot get this wrong.

1 • What you need (and what you don't)

You need - A host — a volunteer, ministry leader, teacher, or coordinator. **No medical training required.** If anything, a non-clinician host makes the education-only boundary easier to hold. - A screen or TV, or a laptop that can be passed around a small group. (The deck also works printed — see \$7.) - Printed take-home sheets: one per person, in the language they read. Print extras. - Chairs — with backs, for the 2-minute activity. - 60 minutes.

You do NOT need - A doctor, nurse, or any clinician in the room. - A blood-pressure cuff, glucose meter, scale, or any device. **Do not bring one.** The moment a device comes out, an education night starts to look like a screening — which is exactly what this program is not. - Anyone's medical history, forms, or sign-in sheet with health information on it.

The kit files

File	What it is
<code>slides.html</code>	The 20-slide presenter deck. Opens in any browser. Arrow keys or space to advance; EN/ES toggle bottom-left; “Full screen” button.
<code>slides.pdf</code>	The same deck as a PDF, if you’d rather not use a browser.
<code>handout.pdf</code> / <code>handout-es.pdf</code>	The 1-page take-home sheet, English and Spanish. Print one per person.
<code>host-guide.pdf</code>	This document.
<code>qr/*.png</code>	The QR codes, if you want to reprint or enlarge them.

Everything is free to copy, print, and share **unmodified, with attribution**. Please don’t edit the medical content or remove the disclaimer — that line is what keeps this safe for everyone, including you.

2 • The 60-minute run of show

Time	Slides	Section	Host’s job
0:00–0:02	1–2	Welcome + disclaimer	Read slide 2 out loud, word for word.
0:02–0:17	3–9	Your body’s dashboard: the 5 numbers	Teach. Take the two hand-raise polls.
0:17–0:27	10–13	Your calves are your second heart + the 2-minute activity	Read the consent line on slide 12 out loud, word for word.
0:27–0:37	14–16	How doctors think — 3 questions	Have people say question 2 out loud to a neighbor.
0:37–0:45	17–18	When it’s 911, not wait-and-see	Slow down. This is the section that matters most.
0:45–0:55	19	Q&A — rules of the road	Read the three rules before the first question.
0:55–1:00	20	Close + QR codes	Hold the slide up long enough for phones to scan.

If you’re running long, cut from the 5-numbers section (slides 5 and 7 compress well). **Never** cut or rush slides 2, 12’s consent line, 17, 18, or 19’s rules. Those five are the safety spine of the program.

3 • The three things you must read out loud, word for word

These are not suggestions. They are what makes a room full of people safe, and what keeps you — and Dr. Schamma — on the right side of the line between education and medical care.

A. The opening disclaimer (slide 2, at 0:00)

English: “Tonight is health education only. It is general information — not medical advice, not a diagnosis, not treatment, and it does not create a doctor–patient relationship with anyone. Nobody here is going to be examined, screened, or told what is wrong with them. Your own doctor always comes first. Nothing you hear tonight should ever be a reason to start, stop, or change a medicine — that conversation belongs to you and your doctor or pharmacist. And if anyone here has an emergency at any point tonight, we call **911** immediately.”

Español: “Esta noche es solo educación de salud. Es información general — no es consejo médico, ni diagnóstico, ni tratamiento, y no crea una relación médico–paciente con nadie. Aquí nadie va a ser examinado, evaluado, ni le vamos a decir qué tiene. Tu propio médico siempre va primero. Nada de lo que escuches esta noche debe ser motivo para empezar, suspender ni cambiar un medicamento — esa conversación es entre tú y tu médico o farmacéutico. Y si alguien aquí tiene una emergencia en cualquier momento de esta noche, llamamos al **911** de inmediato.”

B. The activity consent line (slide 12, at ~0:22 — *before anyone stands up*)

English: “This next part is completely optional. Please only do what feels safe for your own body. Stay seated and just watch if you’d rather — you’ll get exactly the same information. Hold the back of a chair or a wall the whole time. If you feel dizzy, short of breath, or any pain, stop right away and sit down. If anything feels wrong, tell someone next to you.”

Español: “Esta parte es completamente opcional. Por favor haz solo lo que se sienta seguro para tu propio cuerpo. Puedes quedarte sentado y solo mirar si lo prefieres — vas a recibir exactamente la misma información. Sostén el respaldo de una silla o la pared todo el tiempo. Si sientes mareo, falta de aire o cualquier dolor, detente de inmediato y siéntate. Si algo se siente mal, dile a la persona de al lado.”

Then present **both** versions — standing and seated — as equally good. Never single out or encourage anyone to stand. Say the seated version first if your group skews older or uses mobility aids.

C. The Q&A rules (slide 19, at 0:45 — *before the first question*)

English: “I’d love to take questions — with three rules that protect everyone in this room. **One:** I’m your host, not your doctor, and even Dr. Schamma can’t advise on a personal case from a slide deck. So the answer to ‘what should I do about my...’ will always be *ask your own doctor* — that’s not a brush-off, it’s the honest answer. **Two:** please don’t share private medical details out loud; ask it as a general question instead. **Three:** if a question is about something happening right now, we stop and call **911**.”

Español: “Me encantaría tomar preguntas — con tres reglas que nos protegen a todos en esta sala. **Uno:** soy el anfitrión, no tu médico, y ni siquiera el Dr. Schamma puede aconsejar sobre un caso personal desde unas diapositivas. Así que la respuesta a ‘¿qué debo hacer con mi...?’ siempre será *pregúntale a tu propio médico* — no es una evasiva, es la respuesta honesta. **Dos:** por favor no compartas detalles médicos privados en voz alta; hazla como pregunta general. **Tres:** si una pregunta es sobre algo que está pasando ahora mismo, paramos y llamamos al **911**.”

4 • What to say — and what never to say

The whole skill of hosting this is one move: **turn a personal question into a general one, or hand it to their doctor.** Here is that move, in the six situations you will actually face.

Someone says...	✗ Never say	✓ Say this instead
"My blood pressure was 150/95 — is that bad?"	"Yes, that's stage 2, you should..."	"I can't read anyone's numbers here — that's your doctor's job with your whole picture. What I <i>can</i> say is what the general ranges mean, and slide 4 has them. Bring that number to your next visit and ask what your personal target is."
"Should I stop taking my water pill?"	Anything at all about the medicine	"That's a question only your doctor or pharmacist can answer — and it's genuinely important that you ask them before changing anything. Never stop a prescribed medicine on your own."
"Look at my leg — what is this?"	"That looks like..."	"I'm not able to look at or diagnose anything tonight, and I'd be doing you a disservice if I tried. If a leg is <i>suddenly</i> painful, swollen, warm or red, that's a call-911 situation. Otherwise, please get it looked at by your doctor."
"What vitamin should I take?"	Any recommendation	"Supplements interact with prescriptions more than people expect, so that one goes to your doctor or pharmacist."
"Does this mean I have diabetes?"	"It sounds like..."	"Nobody gets diagnosed at a Health Night — that takes your own test results and your own doctor. What tonight gives you is the vocabulary to ask them well."
"I'm having chest pain right now."	"Let's see if it passes / sit down and rest"	Stop the program. Call 911. See §5.

Three phrases that will carry you through any question you didn't expect: 1. "That's a great question for your own doctor — and here's how I'd ask it..." 2. "I can explain how that works in general, but I can't speak to anyone's personal case." 3. "I don't know — and I'd rather tell you that than guess. Dr. Schamma's site has an article on that; it's on the sheet."

Also, plainly: you are not being asked to be an expert. You are being asked to press the arrow key and read what a physician wrote. That is the whole job, and it is enough.

5 • If someone has a medical emergency during the night

This is unlikely. Plan for it anyway — you'd plan for a fire.

1. **Call 911 immediately.** (Or your local emergency number.) Do not wait to see if it passes. Do not drive the person yourself.
2. **Stop the program.** Nothing on these slides is more important.
3. **Say where you are, clearly** — full street address and which door the ambulance should use. Assign one specific person to go meet them outside; "somebody go wave them down" gets nobody.
4. **Do not give medicine, food, or water**, and do not offer medical advice. Stay with the person, keep them calm and seated or lying down, and let the 911 dispatcher tell you what to do — they will.
5. If your venue has an AED and someone is unresponsive and not breathing normally, send someone for it while 911 is on the line. The dispatcher will walk you through it.
6. Afterwards, **don't discuss the person's health with the group.** "They're being looked after, let's give them their privacy" is the complete and correct statement.

Know before people arrive: your building's exact street address, the nearest cross street, which entrance an ambulance should use, and where the AED is (if there is one). Write it on the front of this guide.

6 • Room setup (15 minutes before)

- **Chairs with backs**, in rows or a semicircle. The activity needs something to hold onto.
 - **Clear the aisles.** People will stand up during slide 12.
 - **Screen test:** open `slides.html` in a browser, press the **Full screen** button, arrow through two slides, and check that the back row can read the smallest text (the grey source lines). If they can't, that's the row you'll need to read aloud for.
 - **Set the language before people walk in** using the EN/ES buttons at the bottom. The whole deck switches instantly. If your group is mixed, present in the majority language and put both handouts on the chairs.
 - **Handouts on every chair, not on a table by the door.** A sheet on a table goes home with a third of the room; a sheet on a chair goes home with nearly everyone.
 - **Water, and a chair near the door** for anyone who needs to sit out the activity without walking across the room.
 - **Test the QR codes with your own phone** before the night. Point your camera at slide 20 on the actual screen — glare and low projector brightness are the two things that break QR scanning, and you want to find that out now, not at 0:55.
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7 • The handout, and the QR codes

The take-home sheet is one page and carries the whole night: the five numbers table, the calf-pump routine, the three questions, and the 911 list. Three QR codes at the bottom go to:

- drsammaexplains.com/#free — the free guide and the weekly newsletter.
- drsammaexplains.com/numbers — the Know Your Numbers cheat sheet.
- drsammaexplains.com/products — Dr. Schamma's books and guides.

Print it double-sided with English on one side and Spanish on the other if your group is bilingual — it's the same page in two languages, and people hand it to family members who read the other one. That is, in practice, how this program spreads.

No printer? The deck's final slide has the same QR codes at full screen size. Leave it up during the close and people will photograph it.

No, you don't have to collect anything. No sign-in sheet, no emails, no forms. If someone wants to stay in touch with Dr. Schamma's work, the QR code does that on their own phone, on their own terms. Please don't collect health information about attendees — for their privacy and your own protection.

8 • Frequently asked host questions

Do I need Dr. Schamma there? No. This kit exists precisely so you can run it without him. He's a practicing physician in Texas; this is how he can reach your room without being in it.

Can I charge for it? The kit is free and meant to stay free to attendees. If your organization covers its own room or printing costs, that's between you and your group.

Can I record it or put it online? Record your own hosting if you like, but please don't re-publish the deck or the handout as your own material, and don't edit the medical content. Attribution to Dr. Schamma Salomon, MD and drsammaexplains.com stays on every page.

What if someone in the room is a nurse or doctor? Wonderful — and the rules don't change. A clinician in the room is still not anyone's treating physician, and a community room is not a clinical setting. Personal questions still go to each person's own doctor.

Can I run it in 30 minutes? Yes: slides 1–2, 3–4 (blood pressure only), 10–13 (second heart + activity), 14–15 (the questions), 17–18 (911), 20 (close). Keep every read-aloud line intact.

Can I run it for teens, or a youth group? The content is written for adults, but the 911 section and the three questions work for any age from about middle school up. Get a parent or guardian's okay for the activity portion with minors, exactly as you would for any other physical activity.

Someone asked something I couldn't answer and I felt useless. You weren't. "I don't know, ask your doctor" is a *better* answer than a confident wrong one, and everyone in the room can tell the difference. It's also the answer Dr. Schamma would give about someone he hasn't examined.

9 • After the night — two minutes, if you're willing

Dr. Schamma reads these himself and uses them to improve the kit for the next host.

Email **jils19802012@gmail.com** with: - Where you hosted it and roughly how many people came. - The one question the room asked that this deck didn't answer. - Anything that was confusing, ran long, or fell flat.

That's it. No forms, no report. The next version of this program is built out of what you noticed.

For education only — general health information, not medical advice, diagnosis, or treatment, and it does not create a doctor–patient relationship. Always consult your own doctor. Never start or stop any medication or prescribed therapy without your own doctor. In an emergency, call 911.

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