



Last updated: September 10th, 2025

Medical Innovation

PLEASE NOTE THE FOLLOWING DIFFERENCES IN HOW THIS EVENT WILL BE RUN AT HOSA CANADA'S FALL LEADERSHIP CONFERENCE (FLC):

1. Students are NOT required to have finished making the innovation prototype prior to competing at FLC only. Students should, however, propose a plan and provide predictions for results and analysis at FLC only.
2. The Digital Medical Innovation Outline will be pre-judged using digital submissions at FLC. The submission link will be made available via the online course for this event. The submission deadline for FLC is 11:59 PM ET on October 31st, 2025.
3. Only the Digital Medical Innovation Outline will be evaluated at FLC; there will be no Round Two.

PLEASE NOTE HOSA CANADA'S SPRING LEADERSHIP CONFERENCE (SLC) WILL BE IN-PERSON AND THIS EVENT WILL BE RUN ACCORDING TO THE GUIDELINES IN THE FOLLOWING PAGES, EXCEPT FOR THE FOLLOWING DIFFERENCE:

1. The Digital Medical Innovation Outline will be pre-judged using digital submissions at SLC. The submission link will be made available via the online course for this event. The submission deadline for SLC is 11:59 PM ET on February 6th, 2026.

Medical Innovation

Teamwork Event

Eligible Divisions: Secondary & Postsecondary / Collegiate	Round 1: Digital Outline pre-judged	Digital Upload: YES
Team Event: 2-4 competitors per team	Round 2: Presentation	Required Display Time: YES



New for 2025 – 2026

Editorial updates have been made.

Event Summary

Medical Innovation provides HOSA members with the opportunity to gain knowledge and skills required to impact the future of health and/or the delivery of healthcare through the development of a new medical innovation. This competitive event consists of two rounds, and each team consists of 2-4 people. In Round One, judges will evaluate the medical innovation plan/outline and the top scoring teams will advance to Round Two the oral presentation. This event aims to inspire members to be proactive future health professionals by sharing their unique medical innovation and outcomes with others.

Disclaimer

If a competitor is interested in obtaining a patent for their original work, it is the responsibility of the competitor. More information on patents may be found at the [US Patent Office](#) or [European Patent Office](#). HOSA does not provide patent protection for this event.

Dress Code

Proper business attire or official HOSA uniform. Bonus points will be awarded for [proper dress](#). All team members must be properly dressed to receive bonus points.

Competitor Must Provide

- [Photo ID](#)
- ONE team member uploads outline to the HOSA Digital Upload System by May 15 for ILC competition (see advisor regarding SLC requirements and deadlines)
- Innovation and all associated materials/exhibit items
- Index cards or electronic notecards for presentation (optional)
- Outline (hard copy is optional for in-person presentation)

HOSA Conference Staff will provide equipment and supplies as listed in [Appendix I](#).

General Rules

1. Competitors must be familiar with and adhere to the [General Rules and Regulations](#).

Official References

2. Websites that may provide useful information are:
 - A. [Johnson and Johnson](#)
 - B. [Cleveland Clinic](#)
 - C. [Deloitte](#)

The Medical Innovation Research, and Exhibit

3. The team will create an original medical innovation of their own idea and design. Innovation should be something that could lead to an advancement in medicine or the delivery of healthcare. Teams will build a prototype of their innovation, provide supporting evidence for why this innovation is needed, and summarize their innovation.

4. Topics could include, but are not limited to:
 - A. Medical or healthcare innovation
 - B. Emerging technologies in health
 - C. Advances in medicine
5. Innovations in this event *must* be original ideas. It is the competitor's responsibility to perform due diligence to determine whether or not their idea/innovation already exists in publication or patent. Begin with an internet search. For more information, visit [uspto.gov](https://www.uspto.gov) or the [European Patent Office](https://www.european-patent-office.org).
6. Exhibit information should include, but is not limited to, the following items:
 - A. What the innovation is and what it does/how it is used.
 - B. Innovation impact on the future of healthcare delivery.
 - C. How innovation may increase the quality of life.
 - D. How innovation may reduce healthcare costs.
7. Anyone viewing the exhibit should be able to have a general idea of the medical innovation without having someone there to speak about it.
8. For both rounds, the work **must** be the original work of the competitors, including the artistic aspects of the exhibit. Allowable artwork may include:
 - A. Competitors produced illustrations, designs, and/or computer-generated graphics.
 - B. Clip art or other graphics used in compliance with copyright laws.
 - C. Photographs used in compliance with copyright laws.
 - D. Computer or machine generated lettering.

ROUND ONE: Digital Medical Innovation Outline

9. The digital upload should show and explain how the exhibit will be organized and serve as a guiding plan for the exhibit. Think of it as the "outline" for what the physical exhibit will look like – it is the planning you do to create your exhibit and innovation. From the digital outline judges should have a clear vision of what to expect when they see the team's exhibit in-person. The digital outline should convince the judges of the value of the project and leave them with a desire to see the full exhibit and hear the team's presentation.
10. The digital upload should be completed in the "PowerPoint slide" style and format but can be created on any digital platform, such as Canva, PPT, Google Slides, or a platform of the team's choice. Think of each required piece of information listed in Rule #11 as a slide(s).
11. The digital outline should include:
 - A. Title Slide including Event Name, Team Member Names, HOSA Division, HOSA Chapter #, School Name, [Chartered Association](#) (1 slide only)
 - B. What the innovation is and what it does/how it is used. (4 slides)
 - C. Innovation impact on the future of healthcare delivery. (2 slides)
 - D. How innovation may increase the quality of life. (2 slides)
 - E. How innovation may reduce healthcare costs. (2 slides)
 - F. Creative and artistic impact – describe how your innovation and exhibit will look; what elements will be included to showcase the innovation; what will make your exhibit stand out from others? (2 slides)
 - G. Reference Page(s) should be included in the digital upload: List the literature cited to give guidance to the project. American Psychological Association (APA) is the preferred resource in Health Sciences. *Points will be awarded for compiling a clean, legible reference page(s), but the formatting of the reference page(s) is not judged. (as many slides as needed)*
12. Pay attention to how many slides each section in item #11 A-G is allowed. The total number of slides included in the digital upload will be no more than 13 total slides (not including any reference page slides).

13. The slides will be uploaded as one combined pdf file or publicly viewable link (if the link is not set to public access, judges will not be able to score it).
14. The Round One outline is not needed, used, or judged for Round Two.

REQUIRED Digital Uploads

15. ONE member of the team **MUST** upload the following item(s) to the HOSA Digital Upload System by May 15:
 - A. Exhibit outline with required information – as one combined pdf file or publicly viewable link.

May 15 at midnight EST is the **final deadline**, and there will be **NO EXCEPTIONS** to receipt of the required materials after the deadline.
16. Detailed instructions for uploading materials can be found at:
<https://hosa.org/competitive-event-digital-uploads/>
17. State Leadership Conference (SLC) vs. HOSA's International Leadership Conference (ILC)
 - a. **State Leadership Conferences.** The competitor must check with their Local Advisor for all state-level processes used for competition, as digital uploads may or may not be required.
 - b. **International Leadership Conference.**
 - i. If a competitor uses the HOSA Digital Upload System as a requirement at the SLC, the competitor **MUST upload an ADDITIONAL time for ILC by May 15.**
 - ii. If the HOSA Digital Upload System is NOT used at the competitor's SLC, it is still the competitor's responsibility to upload the product for HOSA's ILC no later than May 15. Not using the HOSA Digital Upload System at a competitor's State Leadership Conference is not an exception to the rule.
18. The FINAL ILC digital upload deadline is May 15. We **STRONGLY** suggest not waiting until the last minute to upload online to avoid user challenges with the system.
19. For ILC, the digital materials uploaded by May 15 will be PRE-JUDGED. Competitors who do not upload materials are NOT eligible for the presentation portion of the competition and **will NOT be given a competition appointment time at ILC.** All digital content uploaded as of May 15 is what will be used for pre-judging at ILC.

Required Project Display Time at ILC

20. All competitors at the International Leadership Conference are **required** to attend the **HOSA Project Display Time** for this event, as scheduled per the conference program. Team members will stand with their innovation and share event experiences with conference delegates. Failure to attend Project Display Time will result in a 15-point deduction from Round Two.
21. Exhibits must be picked up by competitors as instructed. Any exhibits not picked up ***within the given timeframe*** will become the property of HOSA-Future Health Professionals and may be discarded.

Project Display Setup at ILC

22. All teams will have **fifteen (15) minutes** to assemble their innovation and overall table exhibit before the display time begins. Only registered competitors will be allowed to set up the exhibits.
23. There will be one or two teams per table. Once positioned on the table with three-dimensional exhibit items, the maximum dimensions are:
 - A. WIDTH: 48 inches, DEPTH: 24 inches
 - B. Exhibits which do not adhere to these dimensions will be assessed penalty points in Round Two.
24. The Section Leader or Event Manager will measure the exhibit from a beginning point to the furthest point of the exhibit.
 - A. There is no maximum height limit, however exhibits must be stable enough to sit on the table without assistance or fear of falling.

- B. Width will be measured from the widest point of anything on the exhibit to the opposite point.
 - C. Depth will be measured from the deepest point of anything on the exhibit to the opposite point.
 - D. Exhibit materials may not extend beyond the edge of the exhibit table.
 - E. Dimensions include models, electronics, mannequins and all other exhibit items.
25. All teams will have the same size table. Exhibits must fit on this table without hanging off, as the next table may be in very close proximity. Teams may remove items from the exhibit to display to the judges and use the surrounding space, provided they do not encroach on the area of the next exhibit.
 26. Teams should assemble materials so that the overall exhibit can stand alone. Anyone viewing the innovation exhibit materials should be able to have a general idea of the medical innovation without having someone there to speak about it. This may include any pre-recorded materials on battery-powered devices.
 27. Competitors are responsible for the safety and proper functioning of all equipment they bring to this event. Teams *may not* use any flames, body fluids, living organisms, sharps, any equipment/materials that could expose anyone to risk of bodily harm or danger. Invasive procedures and skin puncturing of any kind are **Prohibited**.
 28. Electricity will not be provided. Teams **MUST** use battery power instead of electricity for their exhibits if power is required. Any noise (bells, alarms, etc....) used in exhibit/presentation must not interfere with neighboring exhibits/presentations.
 29. No equipment/supplies (except tables) will be provided for this event. All equipment/supplies needed must be provided by the team. No Wi-Fi or internet service will be provided. It is the team's responsibility to ensure that all equipment is in working condition.
 30. Teams will write their Event Name, Team Member Names, HOSA Division, HOSA Chapter #, School Name, [Chartered Association](#) on the back of their exhibit for easy identification on-site.

ROUND TWO: The Presentation

31. The top teams from Round One in each division will advance to Round Two, for the oral presentation sharing their innovation exhibit. The number of advancing teams will be determined by criteria met in Round One, space and time available for Round Two. Round Two finalists will be announced on-site at ILC per the conference agenda.
32. Teams must bring their physical exhibit to ILC competition, to reference during the Round Two presentation and to use during the required display time.
33. Round Two qualifying teams will report to the scheduled room at their team assigned appointment time to present a seven (7) minute prepared oral presentation to the judges.
 - A. Use of index card notes during the presentation are permitted. Electronic notecards (on a tablet, smart phone, laptop, etc....) are permitted, but will not be shown to judges.
 - B. During the seven (7) minute prepared presentation, time cards will be shown with one (1) minute remaining and time will be called at the end of the seven (7) minutes.
 - C. All team members must take an active role in the presentation.
34. Each team that advances to the presentation round will be judged on their ability to communicate information to the judges about their innovation. The presentation will:
 - A. Explain and teach judges about the innovation;
 - B. Demonstrate the medical innovation to the judges, including how it is used;
 - C. Include the purpose behind the innovation, why it is needed and how it will add value and benefit the healthcare system;
 - D. Explain the anticipated costs of the innovation for the consumer and/or the healthcare system;
 - E. Describe training requirements needed to use or implement the medical innovation and,
 - F. Highlight how the innovation fits within the healthcare field and what practitioners/consumers are needed to implement it.

Final Scoring

35. Scores from Round One will be added to Round Two to determine the final results.

36. In the event of a tie, a tiebreaker will be determined by the areas on the rating sheet section(s) with the highest point value in descending order.

Future Opportunities

Graduating from high school or completing your postsecondary/collegiate program does not mean your HOSA journey has to end. As a HOSA member, you are eligible to become a HOSA Lifetime Alumni Member - a free and valuable opportunity to remain connected, give back, and help to shape the future of the organization. Learn more and sign up at hosa.org/alumni.

MEDICAL INNOVATION

Round 1 – The Innovation Exhibit

Section # _____
Team # _____

Judge's Signature _____
Division: SS _____ PS/Collegiate _____

Exhibit Outline	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Title Slide:	Title Slide is included with ALL needed information. (Event Name, Team Member Names, HOSA Division, HOSA Chapter #, School Name, Chartered Association)	N/A	N/A	N/A	Title slide is not included or missing one or more components	
Exhibit Outline	Excellent 15 points	Good 12 points	Average 9 points	Fair 6 points	Poor 0 points	JUDGE SCORE
2. Description of the Innovation and what it is / how it is used	Outline provides an exceptional representation of what the innovation is, what it does, and how it is used. Information is supported by data that is accurate, current, and presented in a logical manner.	The content of the outline is mostly clear, ideas are sequenced in a logical manner. The outline provides information that describes the innovation and its use.	The information on the exhibit outline is somewhat vague and does not clearly explain the innovation and/or its use.	The sequencing of ideas throughout the outline is unclear. The outline includes little information or data to support the innovation.	Information on the outline is unclear and does not provide understanding of the innovation and its use.	
3. Innovation impact on the future of healthcare delivery.	The outline provided outstanding information on the impact on the future of healthcare delivery, providing a comprehensive explanation.	The outline provides some information regarding the impact of innovation on the future of healthcare delivery.	The outline was vague regarding the impact of innovation on the future of healthcare.	The outline regarding the impact of innovation on healthcare delivery is unclear and vague.	The outline does not provide information regarding the impact of innovation on the future of healthcare delivery.	
4. How innovation may increase the quality of life	The outline clearly describes the innovations' impact on the quality of life and gives a clear idea of how it would be effective.	The outline contains some information on the innovation's impact on quality of life, but more information would have been helpful.	The outline was missing critical points regarding the impact of the innovation on the quality of life.	The outline regarding the innovation's impact on the quality of life left many questions and was unclear.	The outline does not provide information regarding the impact of innovation on the quality of life.	
5. How innovation may reduce healthcare costs.	The outline was exceptional in describing the reduction of healthcare costs.	The outline included some points regarding the innovation's reduction of healthcare costs.	The outline was minimal in an explanation of how the innovation would reduce healthcare costs.	The outline was very narrow in points regarding the reduction of the healthcare costs associated with the innovation.	The outline does not provide information regarding the impact of the innovation on healthcare costs.	
6. Creative and Artistic Impact	The outline was extremely effective in describing the creative and artistic plan for the medical innovation. It is very evident the exhibit and innovation will stand out in the crowd. The description excites the judges to want to see the physical exhibit in round 2.	The creative and artistic plan is effective and there are elements that will certainly make it unique. Judges want to see the physical exhibit in round 2.	The creative and artistic plan are present in the outline but could use further development. Some thought has been put into these elements, but they need to be flushed out further.	There is minimal description of the creative and artistic plan for the physical exhibit and innovation. Judges are not sure what unique elements will make this project stand out.	No aspects of creative or artistic elements were included in the outline.	

Exhibit Outline	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
7. Organization	The outline is exceptionally neat, organized, and error-free. Information is clearly displayed and easy to understand and follow.	Outline is neat and organized. The content has a logical flow with only minimal errors.	The outline was basic and could use more organization and thought to be understood.	The outline lacked organization and/or contained several spelling errors. The flow of information seemed to be out of order.	The outline is either too busy or lacks enough detail to support the content.	
8. Reference Page(s)	Reference page(s) included	N/A	N/A	N/A	Reference page(s) not included	
9. Total Slides	The total number of slides in the digital outline is no more than 13 slides (not including any reference page slides)	N/A	N/A	N/A	The digital outline is 14+ slides *not including any reference page slides)	
Total Points Round One (95):						

MEDICAL INNOVATION

Round 2 – The Presentation

Section # _____
 Team # _____

Judge's Signature _____
 Division: SS _____ PS/Collegiate _____

PRESENTATION CONTENT	Excellent 15 points	Good 12 points	Average 9 points	Fair 6 points	Poor 0 points	JUDGE SCORE
1. Explain & Teach	The team shared exceptional depth of knowledge on the innovation content and effectively taught the judges about their innovation.	The team shared knowledge and understanding of the original innovation with the judges.	The team shared an average amount of knowledge on the original medical innovation.	The team demonstrated some command of the knowledge but failed to effectively teach the judges about the original innovation.	The team shared little to no knowledge of the medical innovation with the judges or repeated information.	
2. Demonstration of Prototype	The team did an outstanding job demonstrating the medical innovation prototype. The audience feels competent about how to use the prototype.	The team did a good job demonstrating the innovation prototype.	The presentation of the medical innovation prototype was mediocre.	The team attempted to demonstrate the innovation prototype but experienced challenges.	The presentation of the medical innovation prototype was poor. The prototype did not function correctly.	
3. Purpose: Why this Innovation? Value & Benefit	The team provided clear rationale for the purpose behind the innovation, why it is needed and how it will add value and benefit the healthcare system.	The team was able to explain the value and benefit of the medical innovation to the healthcare industry.	The team provided a short explanation for how the medical innovation will benefit the healthcare industry.	Little demonstration for why this innovation will add value or benefit the healthcare system was given.	The team was unable to explain or demonstrate why this medical innovation will add value or benefit to the healthcare system.	
PRESENTATION CONTENT	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
4. Cost	Detailed information about the cost of the innovation for the consumer and/or the healthcare system was shared.	N/A	Information was shared about the cost of the innovation but judges were left with unanswered questions.	N/A	No relevant information was shared about the cost of the innovation.	
5. Training Requirements	A detailed description of the training requirements to use or implement the medical innovation was shared.	A description of the training requirements was provided.	A short description of the training requirements was provided.	An incomplete description of the training requirements was provided.	There is no description of the training requirements for the medical innovation.	
6. Career Implications	Detailed information was shared about how the innovation fits within the healthcare field and what practitioners / consumers are needed to implement it. It is clear how and what healthcare careers are affected by this innovation.	Mostly relevant information was shared about the career implications of this innovation.	Some information was shared about the career implications of this innovation.	A fair amount of information was shared about the career implications of this innovation, but more detail is needed to be relevant.	No information was shared about the career implications of this innovation.	

PRESENTATION DELIVERY	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
7. Voice Pitch, tempo, volume, quality	The team's voice was loud enough to hear. The competitors varied rate & volume to enhance the speech. Appropriate pausing was employed.	The team spoke loudly and clearly enough to be understood. The competitors varied rate OR volume to enhance the speech. Pauses were attempted.	The team could be heard most of the time. The competitors attempted to use some variety in vocal quality, but not always successfully.	The team's voice is low. Judges have difficulty hearing the presentation.	Judge had difficulty hearing and/or understanding much of the speech due to low volume. Little variety in rate or volume.	
8. Stage Presence Poise, posture, eye contact, and enthusiasm	Movements & gestures were purposeful and enhanced the delivery of the speech and did not distract. Body language reflects comfort interacting with audience. Facial expressions and body language consistently generated a strong interest and enthusiasm for the topic.	The team maintained adequate posture and non-distracting movement during the speech. Some gestures were used. Facial expressions and body language sometimes generated an interest and enthusiasm for the topic.	Stiff or unnatural use of nonverbal behaviors. Body language reflects some discomfort interacting with audience. Limited use of gestures to reinforce verbal message. Facial expressions and body language are used to try to generate enthusiasm but seem somewhat forced.	The team's posture, body language, and facial expressions indicated a lack of enthusiasm for the topic. Movements were distracting.	No attempt was made to use body movement or gestures to enhance the message. No interest or enthusiasm for the topic came through in presentation.	
9. Diction*, Pronunciation** and Grammar	Delivery emphasizes and enhances message. Clear enunciation and pronunciation. No vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone heightened interest and complemented the verbal message	Delivery helps to enhance message. Clear enunciation and pronunciation. Minimal vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone complemented the verbal message	Delivery adequate. Enunciation and pronunciation suitable. Noticeable verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Tone seemed inconsistent at times.	Delivery quality minimal. Regular verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Delivery problems cause disruption to message.	Many distracting errors in pronunciation and/or articulation. Monotone or inappropriate variation of vocal characteristics. Inconsistent with verbal message.	
10. Team Participation	Excellent example of shared collaboration in the presentation of the project. Each team member spoke and carried equal parts of the project presentation.	All but one person on the team was actively engaged in the project presentation.	The team worked together relatively well. Some of the team members had little participation.	The team did not work effectively together.	One team member dominated the project presentation.	
11. Organization and Flow	The presentation was exceptionally organized, clear and coherent. It flowed seamlessly.	The presentation was well-organized, clear and included sufficient detail.	Information shared by presenters was somewhat organized and presented fairly well. The presentation included some details to help with the delivery.	Presentation was not delivered in a clear and concise manner.	The presentation was scattered and unclear; did not flow, and left judges with more questions than answers.	
12. Exhibit Incorporated into Presentation	The exhibit enhanced the messaging of the innovation and helped bring the presentation to life.	The exhibit helped tell the story of the innovation. It complemented the presentation effectively.	The team did an adequate job of using the exhibit to support the presentation.	The exhibit somewhat enhanced the presentation on the innovation yet seemed to miss key points of emphasis.	The exhibit seemed to be an "afterthought" to the presentation. There was a disconnect between what was featured on the exhibit and the presentation.	

EXHIBIT VISUALS	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
13. Artistic Design	The artistic quality is exceptional. The artwork is vibrant, balanced, visually pleasing and pushes the boundaries of artistic expression. The design choices take the exhibit to the next level.	The artistic quality is good; the artwork stands out. The design elements seem to be well-thought out and comprehensive.	The exhibit incorporates balanced design choices, showcasing some artistic features. Some of the design lacks artistic details that took away from the overall visual of the exhibit.	Basic levels of artistic design are incorporated into the exhibit. Better design/color choices should be incorporated to assure the artwork on the exhibit is pleasing to the eye.	The design is simplistic and not visually appealing.	
14. Creativity and Originality	The exhibit incorporates creativity and innovation that make it unique. The exhibit has the "wow-factor" and stands out in the room above all others.	The exhibit is innovative and creative. It offers something unique but is missing the wow-factor.	The exhibit has moderate levels of creativity and originality.	Basic elements of creativity and innovation were captured in this exhibit. It blends in with the other competitors.	Little creativity or originality was captured in the exhibit of this health care exhibit. More effort needed.	
15. Overall Innovation	The exhibit and presentation are an excellent combination to get people excited about the innovation and could have a profound effect on the future of healthcare.	The exhibit and presentation resonated with the audience and made a positive impact. The audience left feeling positive about the new innovation.	The overall effectiveness of the innovation demonstrates some potential to impact the future of healthcare.	The medical innovation needs additional focus in order to gain excitement	The presentation and exhibit need more polish and attention to detail in order to improve the delivery of healthcare. The overall innovation lacks effectiveness and attention to detail.	
Exhibit Overview	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
16. Safety	Exhibit/ equipment is safe and poses no hazards.	N/A	N/A	N/A	Equipment presents safety/hazard concerns.	
17. Innovation Setup & Size	Exhibit materials do not extend beyond the edge of the table and safely stands on the table AND exhibit is no more than 48" wide x 24" deep.	N/A	N/A	N/A	Exhibit does not meet requirements.	
Total Points Presentation (130):						

*Definition of Diction – Choice of words especially with regard to correctness, clearness, and effectiveness.

**Definition of Pronunciation – Act or manner of uttering officially