# Social Media Dos and Don'ts

Oren Fix, MD, MSc, FACP, AGAF, FAASLD
Professor of Medicine
Medical Director of Liver Transplantation
Lead Informatics Physician

# DISCLOSURES

No relevant financial disclosures

I will be discussing off label use of Twitter

# Learning Objectives

- Identify the advantages and risks of using social media professionally
- List the social media Dos
- Summarize common themes of various social medial policies
- Describe social media Don’ts and their consequences

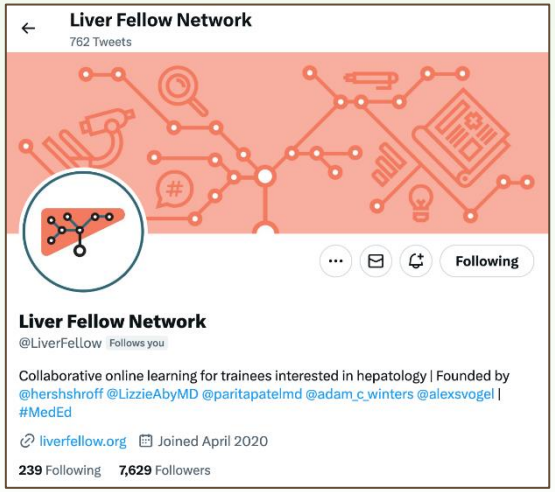
**I've come up with a set of rules that describe our reactions to technologies**

1. Anything that is in the world when you're born is normal and ordinary and is just a natural part of the way the world works
2. Anything that's invented between when you're fifteen and thirty-five is new and exciting and revolutionary and you can probably get a career in it
3. Anything invented after you're thirty-five is against the natural order of things

Douglas Adams, The Salmon of Doubt

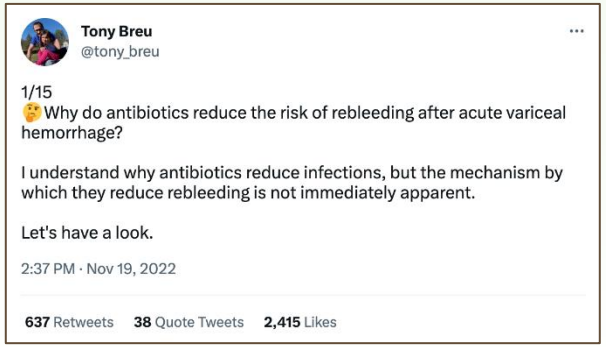
# Advantages of Using Social Media Professionally

Marketing




Networking

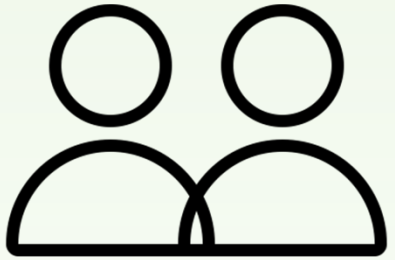
Professional Development




Bilal M et al. Am J Gastroenterol 2019;114:375-376; Bernhardt JM et al. Health Promot Pract 2014;15:168-172

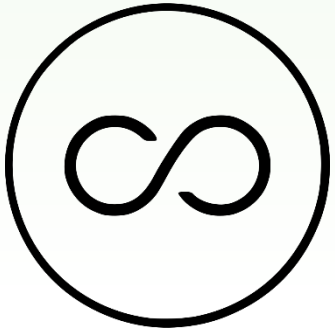
# Risks of Using Social Media Professionally

Professional Reputation



Personal/Professional Overlap

Patient Privacy and Confidentiality



Public and Permanent

Bilal M et al. Am J Gastroenterol 2019;114:375-376; Bernhardt JM et al. Health Promot Pract 2014;15:168-172

# Social Media Dos

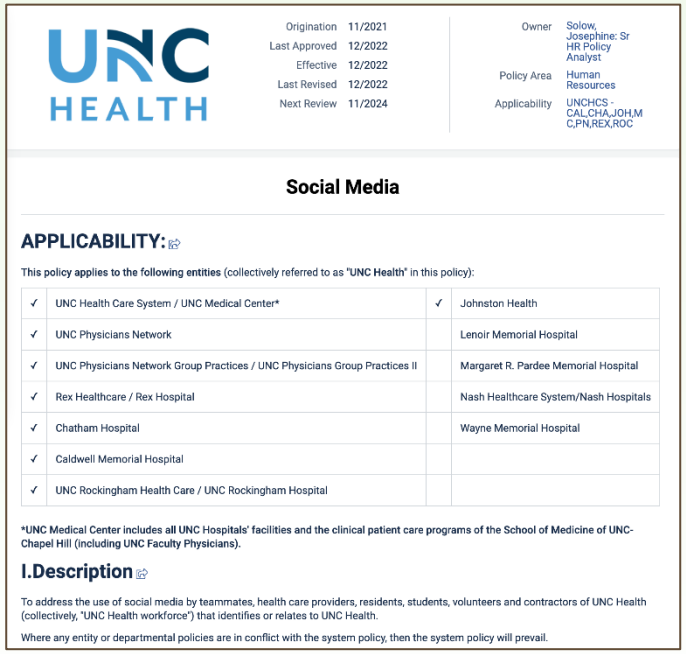
- Consider your audience
- Always maintain trust and confidentiality
- Use a respectful tone when discussing patients
- Identify yourself on professional sites

> Any material written by authors who represent themselves as doctors is likely to be taken on trust and may reasonably be taken to represent the views of the profession more widely
>
> - GMC Doctors' Use of Social Media

- Specify whether or not you are representing an employer
- Be aware of state and institutional social media policies

Bilal M et al. Am J Gastroenterol 2019;114:375-376; Chretien KC et al. JAMA 2011;305:566-567

# Social Media Policies



UNC HEALTH

| | |
|---|---|
| Origination | 11/2021 |
| Last Approved | 12/2022 |
| Effective | 12/2022 |
| Last Revised | 12/2022 |
| Next Review | 11/2024 |
| Owner | Solow, Josephine: Sr HR Policy Analyst |
| Policy Area | Human Resources |
| Applicability | UNCHCS - CAL,CHA,JOH,MC,PN,REX,ROC |

**Social Media**

**APPLICABILITY:**

**This policy applies to the following entities** (collectively referred to as "**UNC Health**" in this policy):

| | | | |
|---|---|---|---|
| ✓ | UNC Health Care System / UNC Medical Center* | ✓ | Johnston Health |
| ✓ | UNC Physicians Network | | Lenoir Memorial Hospital |
| ✓ | UNC Physicians Network Group Practices / UNC Physicians Group Practices II | | Margaret R. Pardee Memorial Hospital |
| ✓ | Rex Healthcare / Rex Hospital | | Nash Healthcare System/Nash Hospitals |
| ✓ | Chatham Hospital | | Wayne Memorial Hospital |
| ✓ | Caldwell Memorial Hospital | | |
| ✓ | UNC Rockingham Health Care / UNC Rockingham Hospital | | |

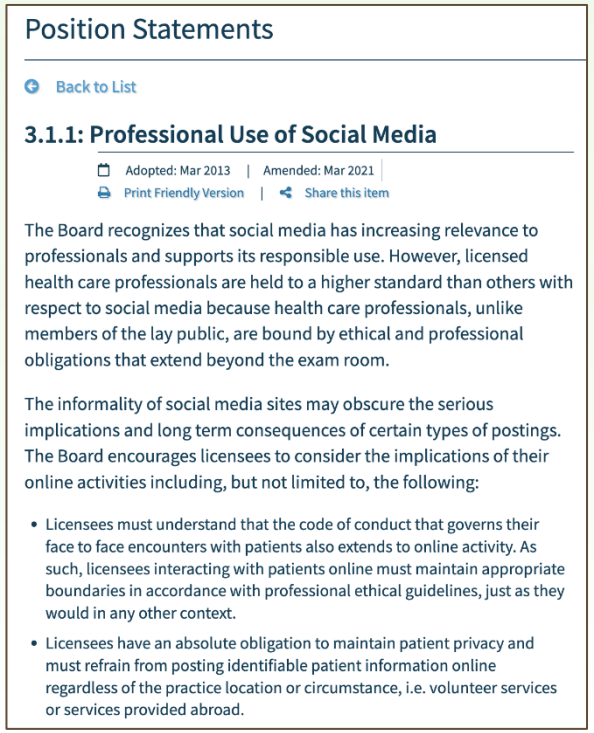
***UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine of UNC-Chapel Hill (including UNC Faculty Physicians).**

**I.Description**

To address the use of social media by teammates, health care providers, residents, students, volunteers and contractors of UNC Health (collectively, "UNC Health workforce") that identifies or relates to UNC Health.

Where any entity or departmental policies are in conflict with the system policy, then the system policy will prevail.

UNC Health



Position Statements

Back to List

**3.1.1: Professional Use of Social Media**

Adopted: Mar 2013 | Amended: Mar 2021

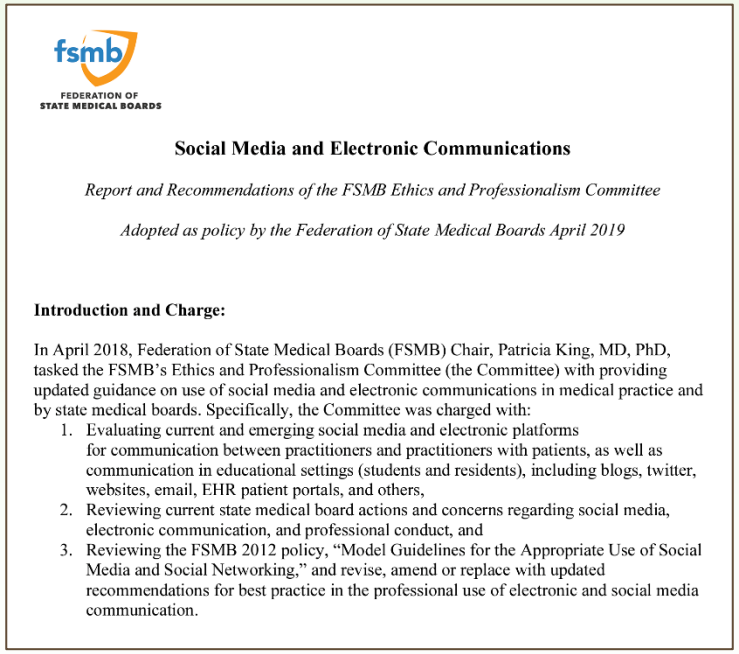
Print Friendly Version | Share this item

The Board recognizes that social media has increasing relevance to professionals and supports its responsible use. However, licensed health care professionals are held to a higher standard than others with respect to social media because health care professionals, unlike members of the lay public, are bound by ethical and professional obligations that extend beyond the exam room.

The informality of social media sites may obscure the serious implications and long term consequences of certain types of postings. The Board encourages licensees to consider the implications of their online activities including, but not limited to, the following:

- Licensees must understand that the code of conduct that governs their face to face encounters with patients also extends to online activity. As such, licensees interacting with patients online must maintain appropriate boundaries in accordance with professional ethical guidelines, just as they would in any other context.
- Licensees have an absolute obligation to maintain patient privacy and must refrain from posting identifiable patient information online regardless of the practice location or circumstance, i.e. volunteer services or services provided abroad.

NC Medical Board



fsmb FEDERATION OF STATE MEDICAL BOARDS

**Social Media and Electronic Communications**

*Report and Recommendations of the FSMB Ethics and Professionalism Committee*

*Adopted as policy by the Federation of State Medical Boards April 2019*

**Introduction and Charge:**

In April 2018, Federation of State Medical Boards (FSMB) Chair, Patricia King, MD, PhD, tasked the FSMB's Ethics and Professionalism Committee (the Committee) with providing updated guidance on use of social media and electronic communications in medical practice and by state medical boards. Specifically, the Committee was charged with:

1. Evaluating current and emerging social media and electronic platforms for communication between practitioners and practitioners with patients, as well as communication in educational settings (students and residents), including blogs, twitter, websites, email, EHR patient portals, and others,
2. Reviewing current state medical board actions and concerns regarding social media, electronic communication, and professional conduct, and
3. Reviewing the FSMB 2012 policy, "Model Guidelines for the Appropriate Use of Social Media and Social Networking," and revise, amend or replace with updated recommendations for best practice in the professional use of electronic and social media communication.

Federation of State Medical Boards

# Social Media Policies

- Patient **privacy and confidentiality**
  - including information that does not directly identify a patient
- **Professionalism/boundaries/compliance** with ethical codes of conduct
- Unacceptable use of **inappropriate language**
  - profane, disparaging, discriminatory, cyberbullying
- Do not provide **medical advice** to specific patients
- **Disclaimer** for personal opinions
  - eg, "The comments and viewpoints expressed in this [blog; website] reflect my own opinions and perspectives and are not in any way sponsored, endorsed, or authorized by UNC Health"
- **Reporting** violations and **consequences** of misuse

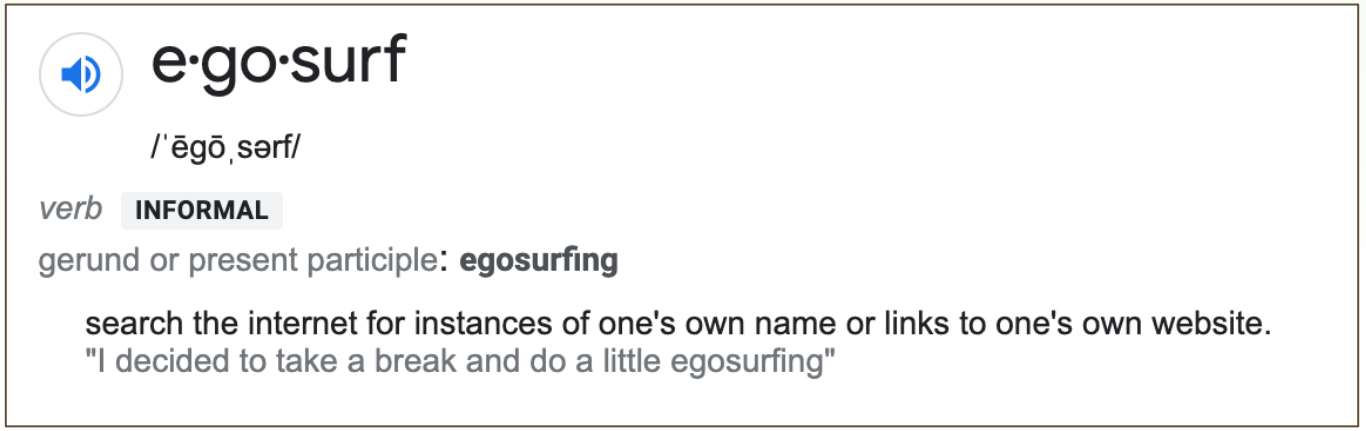
# AMA Code of Medical Ethics

- Follow ethical guidance for patient **privacy, confidentiality, and informed consent**
- Monitor one's **own Internet presence** (self-audit)
- Maintain **appropriate boundaries** of the patient-physician relationship
- Consider **separating personal and professional** online content
- Bring **inappropriate content** to the attention of colleagues and/or report to appropriate authorities
- Recognize that online actions/content may negatively affect **reputations** and have consequences for medical **careers** (particularly students and trainees) and can **undermine public trust** in the medical profession

AMA Opinion 2.3.2. Professionalism in the use of social media. https://code-medical-ethics.ama-assn.org/

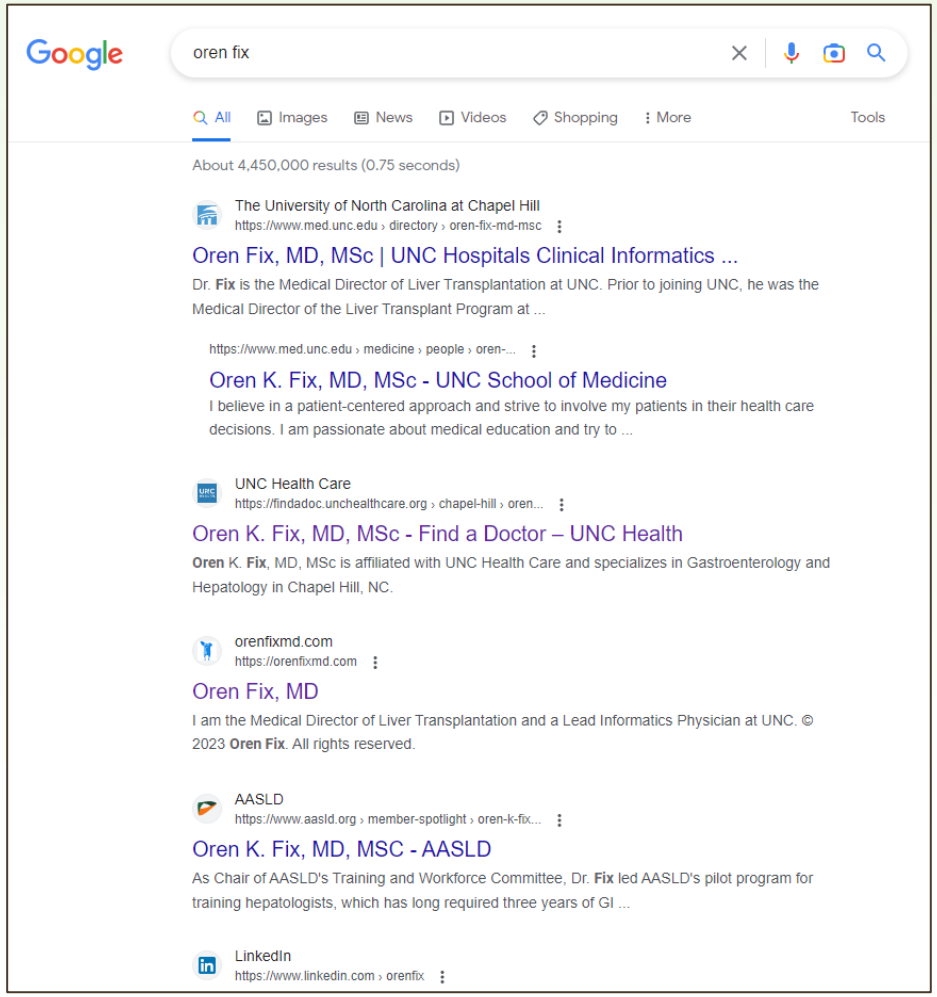
# But I Don't Use Social Media Professionally…!

- Publicly available information about you on social media includes more than just what you post
- Physicians are held to a higher standard online
- Employers/schools may search social media during recruitment
- **Perform self-audits and view profile as others will see it**




Mostaghimi A, Crotty BH. Ann Intern Med 2011;154:560-562

# Self Audit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About 4,450,000 results (0.75 seconds)
The University of North Carolina at Chapel Hill
https://www.med.unc.edu › directory › oren-fix-md-msc
Oren Fix, MD, MSc | UNC Hospitals Clinical Informatics ...
Dr. Fix is the Medical Director of Liver Transplantation at UNC. Prior to joining UNC, he was the Medical Director of the Liver Transplant Program at ...
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Oren K. Fix, MD, MSc - UNC School of Medicine
I believe in a patient-centered approach and strive to involve my patients in their health care decisions. I am passionate about medical education and try to ...
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Oren K. Fix, MD, MSc - Find a Doctor – UNC Health
Oren K. Fix, MD, MSc is affiliated with UNC Health Care and specializes in Gastroenterology and Hepatology in Chapel Hill, NC.
orenfixmd.com
https://orenfixmd.com
Oren Fix, MD
I am the Medical Director of Liver Transplantation and a Lead Informatics Physician at UNC. © 2023 Oren Fix. All rights reserved.
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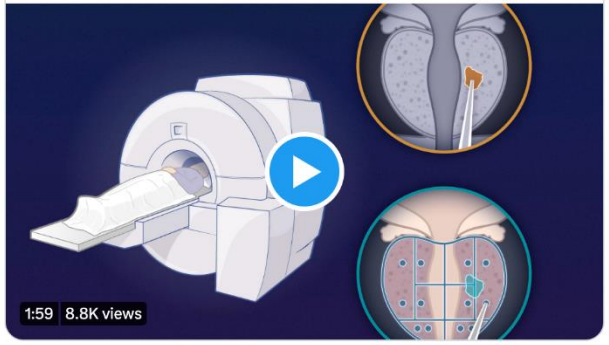
Oren K. Fix, MD, MSC - AASLD
As Chair of AASLD's Training and Workforce Committee, Dr. Fix led AASLD's pilot program for training hepatologists, which has long required three years of GI ...
LinkedIn
https://www.linkedin.com › orenfix

# Separating Personal/Professional Content

**Ashley Winter MD || Urologist** @AshleyGWinter · Dec 14, 2022

It's very important for urologists to amplify this message. PSA remains a flawed test but what we DO with that test has changed radically in recent years. MRIs, perineal biospy, active surveillance. Do our colleagues know?

> **NEJM** @NEJM · Dec 14, 2022
>
> Prostate cancer screening results in a high rate of overdiagnosis. Limiting biopsies to lesions deemed suspicious on magnetic resonance imaging might reduce overdiagnosis. New research findings are summarized in a short video. nej.md/3imSyRm




8 11 56

**Ashley Winter MD || Urologist** @AshleyGWinter · Jan 13

I have questions. And I'm a urologist.

**Do This Immediately if You Have Enlarged Prostate...**

Healthy Guru | Sponsored

158 116 2,786 322.9K

**Ashley Winter MD || Urologist** @AshleyGWinter · Jan 13

This was not on our board exams.

25 6 663 36.1K

**Ashley Winter MD || Urologist** @AshleyGWinter · 14h

Happy Valentines day!! 💕❤️

47 8 1,464 41.2K

**Ashley Winter MD || Urologist** @AshleyGWinter · Jan 18

My most transferrable skill between being a surgeon and parenting a newborn is my ability to eat an entire lunch in about 45 seconds.

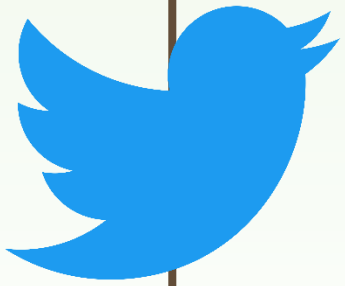
107 118 5,154 287.3K

# "Twitter Triple Threat"

# Separating Personal/Professional Content

**Personal**

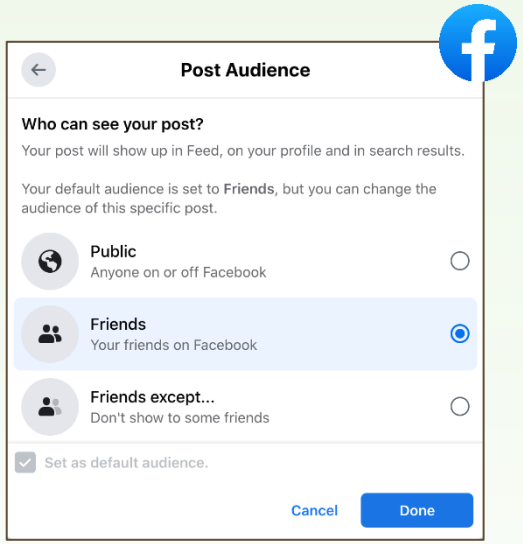
Private account

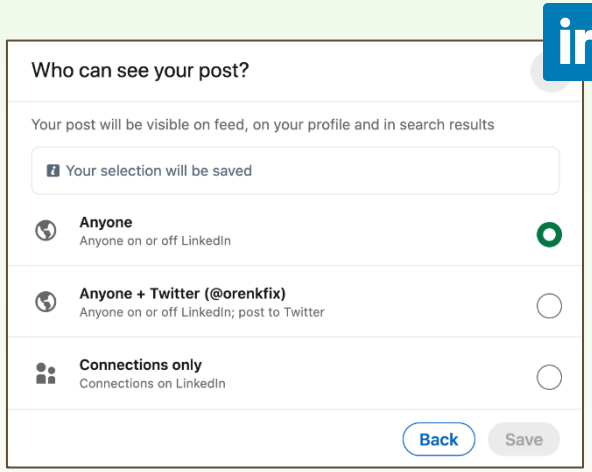


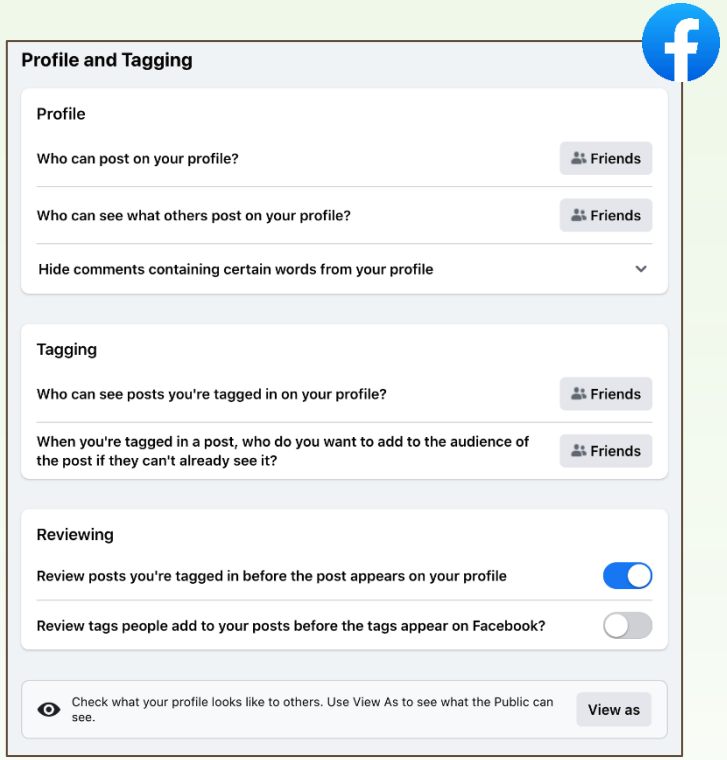
**Professional**

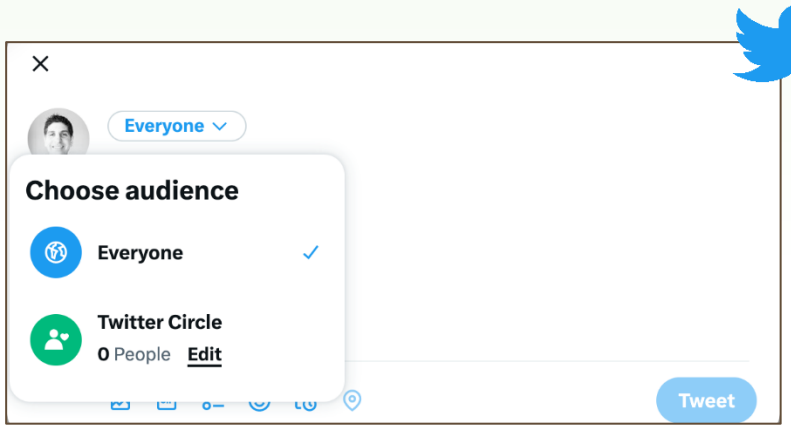
Public account

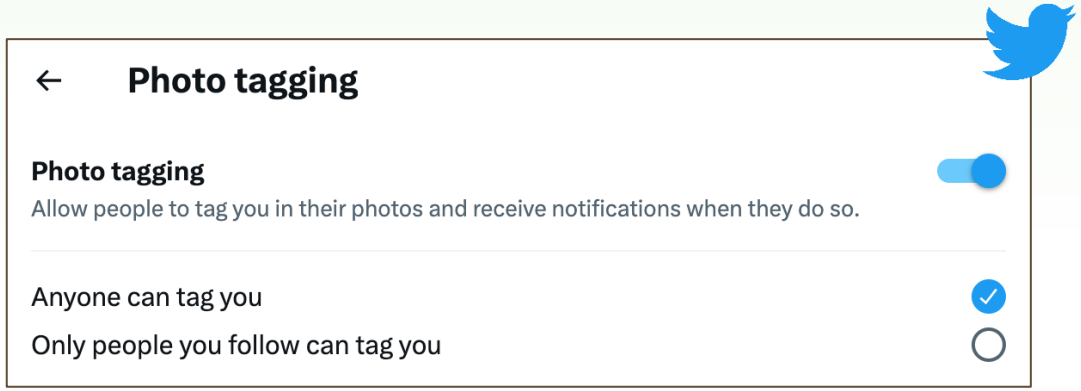
# Privacy Settings



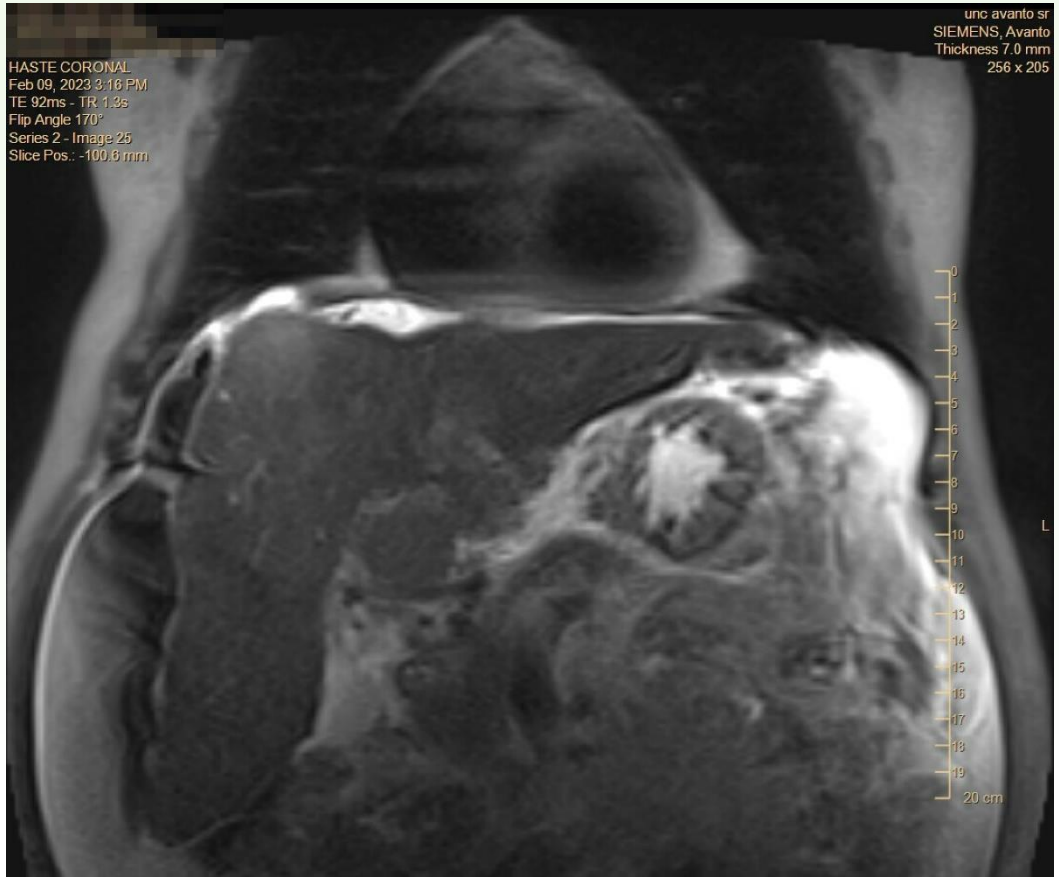



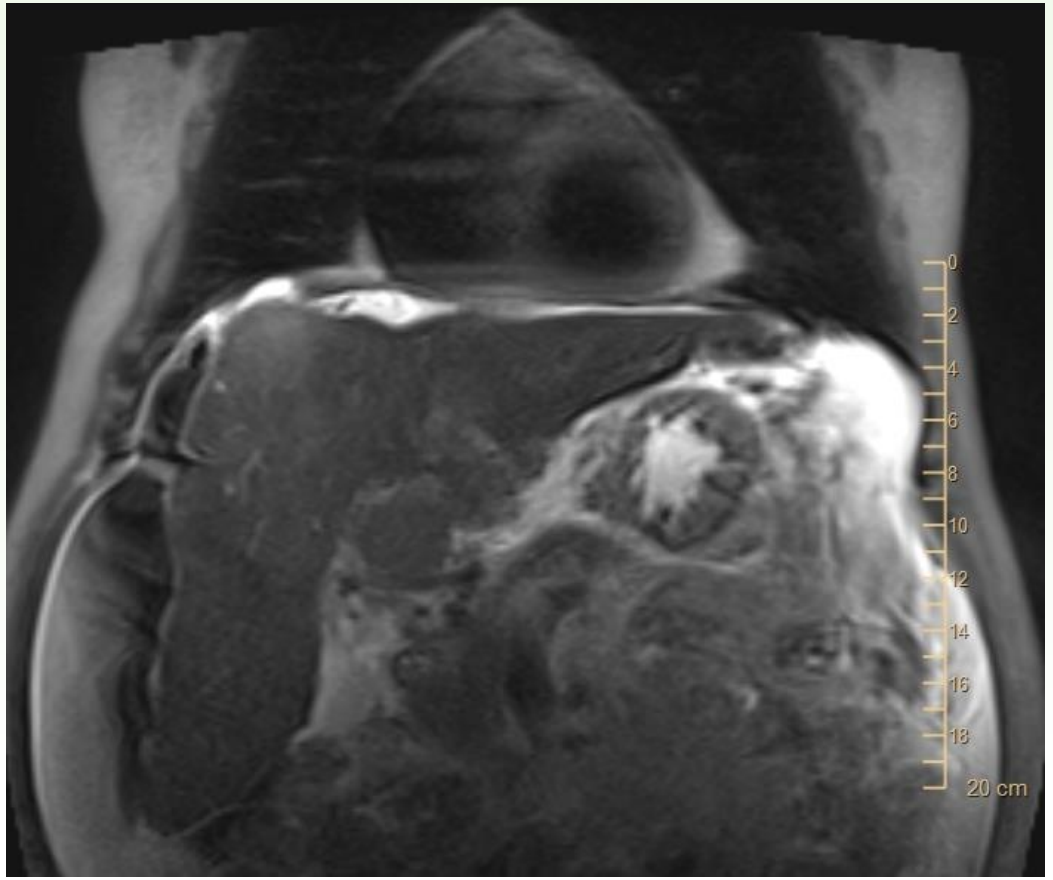
# Social Media Don'ts

- Never post Protected Health Information

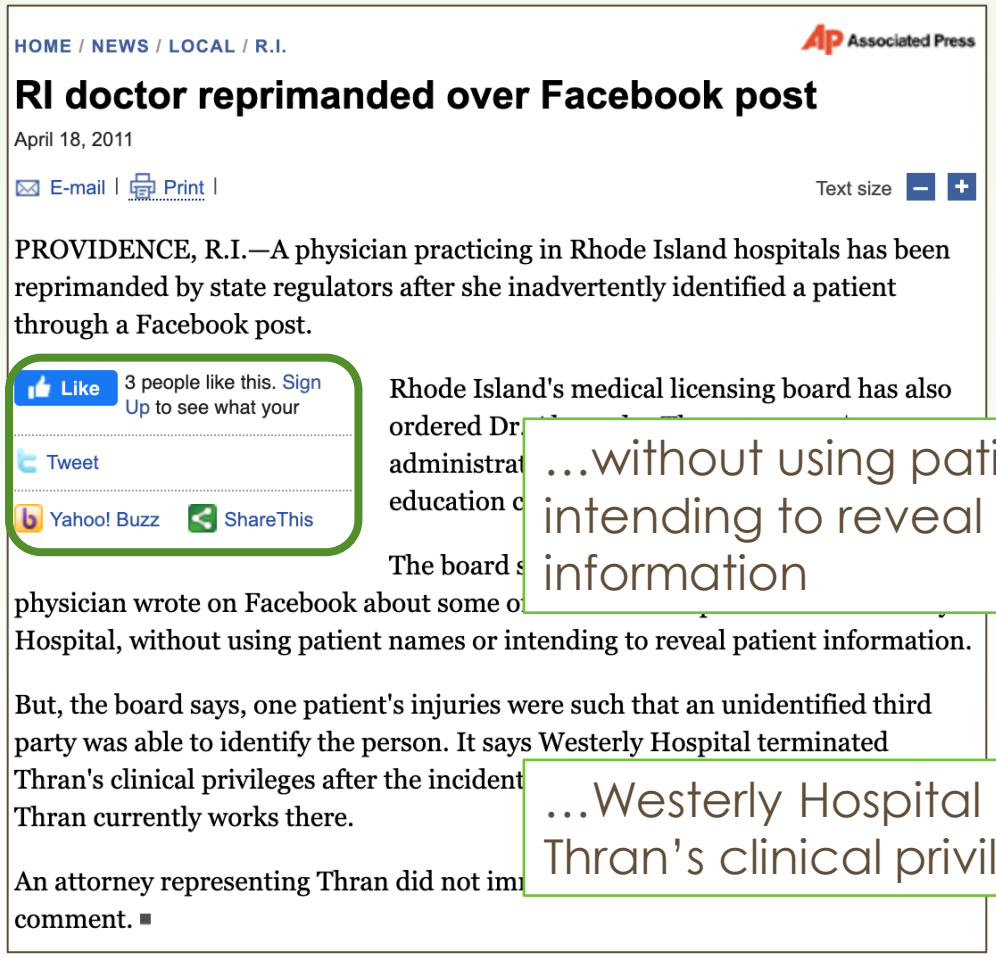
Bilal M et al. Am J Gastroenterol 2019;114:375-376; Moses RE et al. Am J Gastroenterol 2014;109:1128-1132; Greysen SR et al. Ann Intern Med 2013;158:124-130; Chretien KC et al. JAMA 2011;305:566-567; Lagu T et al. J Gen Intern Med 2008;23:1642-1646

# Deidentifying Patient Images



# Patient Privacy



HOME / NEWS / LOCAL / R.I.

Associated Press

## RI doctor reprimanded over Facebook post

April 18, 2011

E-mail | Print | Text size

PROVIDENCE, R.I.—A physician practicing in Rhode Island hospitals has been reprimanded by state regulators after she inadvertently identified a patient through a Facebook post.

Like 3 people like this. Sign Up to see what your

Tweet

Yahoo! Buzz ShareThis

Rhode Island's medical licensing board has also ordered Dr
administrat
education c

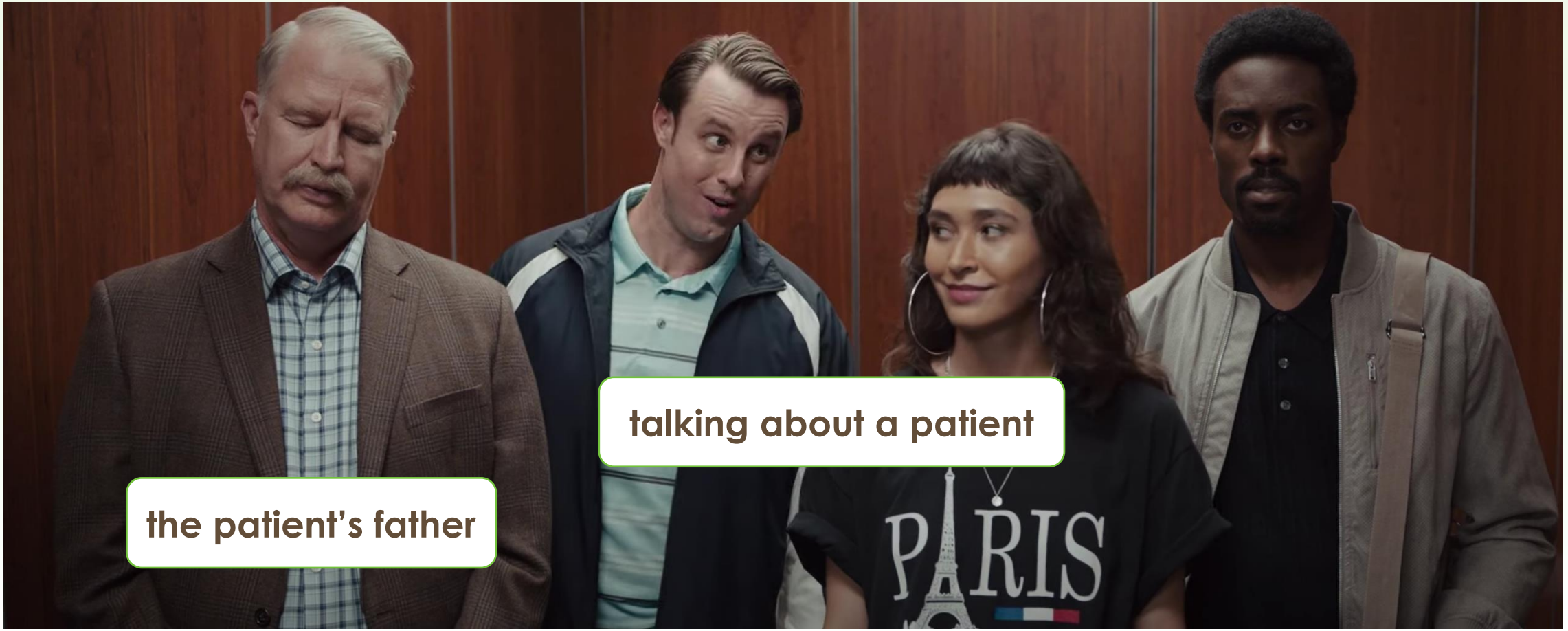
The board s
physician wrote on Facebook about some o
Hospital, without using patient names or intending to reveal patient information.

But, the board says, one patient's injuries were such that an unidentified third party was able to identify the person. It says Westerly Hospital terminated Thran's clinical privileges after the incident
Thran currently works there.

An attorney representing Thran did not im
comment. ■

…without using patient names or intending to reveal patient information

…Westerly Hospital terminated Thran's clinical privileges


talking about a patient
the patient's father
PARIS

# Social Media Don'ts

- Never post Protected Health Information
- Don't complain about patients online
- Don't complain/rant about work/colleagues/employer
- Don't use profanity, discriminatory language, sexually suggestive material
- Don't provide medical advice in response to patient questions
- Don't make false or misleading claims
- Avoid depictions of inappropriate material (eg, inebriation)
- Avoid interacting with patients online

**Doc1971:** Hi there, remember me? I took care of you at Frankenstein Memorial a few weeks ago.
**SuzieQ:** Oh, hi—of course I remember you!
**Doc1971:** Well, we don't need to wait for your follow-up appointment to see each other again. What are you doing this weekend? Want to meet up for a drink?

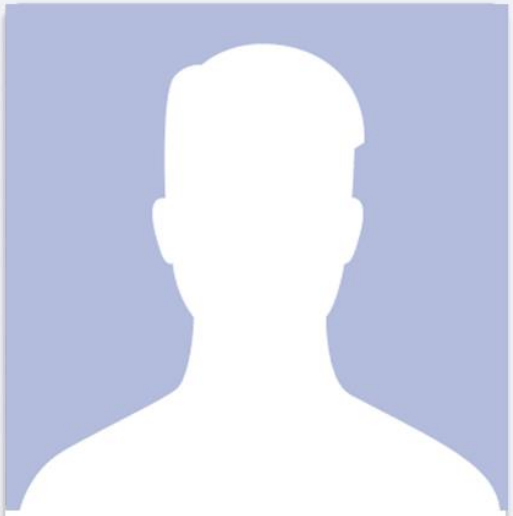
Bilal M et al. Am J Gastroenterol 2019;114:375-376; Moses RE et al. Am J Gastroenterol 2014;109:1128-1132; Greysen SR et al. Ann Intern Med 2013;158:124-130; Chretien KC et al. JAMA 2011;305:566-567; Lagu T et al. J Gen Intern Med 2008;23:1642-1646

# Consequences

- HIPAA violations
  - Federal sanctions
  - Patient-initiated lawsuits
- Loss of job
- Loss of license
- Termination from residency
- Defamation cases

Bilal M et al. Am J Gastroenterol 2019;114:375-376; Chretien KC et al. JAMA 2011;305:566-567; Greysen SR et al. Ann Intern Med 2013;158:124-130

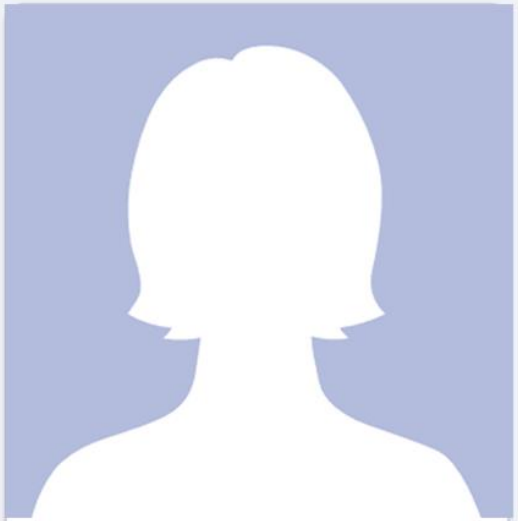
## Friend Requests



**David Patient**

Confirm

Delete



**Pam Patient**

Confirm

Delete

**Hersh Shroff**

Request deleted

# CME/MOC QUESTION

Which of the following is an appropriate professional use of social media?

A. Accepting a Facebook friend request from a patient

B. Discussing a specific patient on Twitter without using PHI

C. Posing a question on Twitter about the management of autoimmune hepatitis

D. Venting about your colleague on LinkedIn

# CME/MOC ANSWER

Which of the following is an appropriate professional use of social media?

A. Accepting a Facebook friend request from a patient

B. Discussing a specific patient on Twitter without using PHI

C. **Posing a question on Twitter about the management of autoimmune hepatitis**

D. Venting about your colleague on LinkedIn

# Thank you!

oren.fix@unc.edu

@orenkfix

orenfix