

How Social Media Can Affect Your Practice

by Nicole Li and Jeffrey Coopersmith,
Coopersmith Health Law Group

Not so long ago, the medical community was alerted to the professional risks attending their use of a common modern technology: namely, elevators. Conversations in hospital elevators can jeopardize not only patient privacy, but also public trust in the profession. Discussing patient care with colleagues while traversing the vastness of today's hospitals has clear time-saving advantages; but the risks clearly outweigh the benefits. Recent technology poses more complex issues.

While some physicians enthusiastically embrace technological advances in their practices, others approach change more cautiously. Modern tools such as electronic health records and streamlined billing systems will undoubtedly achieve widespread use in the near future. What about other recent inventions, such as online social media? Should a medical practice maintain an interactive website? Are there benefits to using platforms such as Facebook or Twitter? Should physicians pay attention to websites that rate their professional performance, such as RateMDs.com or DoctorScoreCard.com?

Many established physicians express doubt that social media can improve the provision of care. This skepticism stems largely from well-grounded concerns about professional propriety and patient privacy, and sometimes from unfamiliarity with the technology. The underlying sentiment seems to be, "Why go looking for trouble?"

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Many younger physicians often hold a different view. For those whose formal education involved, or at times took place in, the online universe, the practical and potential benefits of online social communication in medical practice are much more obvious. The underlying sentiment of this generation appears to be, "It's already happening, so why not get with the program?"

Why might physicians use social media?

The business side of medicine:

Recruitment and retention of patients is important to most medical practices. While online search engines will probably never eclipse professional referrals and patient recommendations, they are an undeniable resource for patients looking for a particular health service. Try Googling your name, the name of your practice, or "best [your specialty] in King County". Medical services are more commercialized than ever, replete with consumer reviews and rankings. Your practice likely has an "online presence", whether you created one or not. One very compelling reason for physicians to pay attention to social media is that patients already are.

Speedier communication: A medical practice that provides a well-maintained, secure website permitting patients

to schedule appointments, request prescription refills, or obtain copies of records should streamline daily clinic operation and improve service to patients. A practice may also alert its patients to changes in clinic hours, practices, staff, or services; announce recent developments in research or practice; notify interested parties about open clinical trials; or publicize changes in public policy.

Creating community: Professional conferences allow physicians to share expertise and experiences. Today, blogs and professional networking websites deepen these connections and foster collegiality.

Strengthening the doctor-patient relationship: Given the limited amount of time allotted for most medical appointments, both physicians and patients must prioritize their time. This time-crunch, along with numerous other factors, may impair patient comprehension. Providing written material for review at home can help; so might providing an online method for the patient to request further information or raise questions about condition or care. For the physician, scarcity of time also may impede awareness of a particular patient's circumstances, including family support,

financial security, and cultural and religious beliefs. The use of online questionnaires that may be updated and expanded offer physicians a current understanding of a patient's daily life.

Pitfalls

Privacy: Perhaps the most important point for physicians to remember is that patients still have privacy rights even if they reveal their own personal health information online. Just because a patient writes openly online about her diagnosis or treatment, it does not follow that her physician can freely respond to her in that forum. A physician must still adhere to all patient confidentiality requirements when communicating with a patient through social media, even if that communication is initiated by the patient. In litigation, damages may be reduced by the fact that the patient revealed confidential information, but that would not erase the breach of confidentiality that occurred upon the physician's response.

Clear communication: The Internet facilitates faster communication. It does not always facilitate better communication. Without the context of body language and tone, the written word can easily be misinterpreted. Explanations that sound succinct and clear in person can come across as curt and dismissive in print. When communicating with a patient online, you may want to finish your message with an offer to speak further in person or by phone.

Litigation: Documentation is key to proper medical practice. Anything posted online should be regarded as part of the permanent record.

Patient abandonment: The formation of a physician-patient relationship establishes professional responsibility on the part of the physician. A physician who unilaterally elects to end a professional relationship with a patient mid-

treatment without either transferring care or informing the patient of the need to find another physician likely commits malpractice. But what of a doctor who logs onto a public website, participates in a discussion with specific recommendations, and then logs off? Is it possible to establish a physician-patient relationship through an online forum? The law is not yet clear on this point. In the virtual world, physicians who announce themselves as physicians should take particular care in communicating with others who seek their advice.

How should physicians use social media?

Separate issues from individuals: If your practice maintains a website or webpage that allows patients to pose questions or request information, then you should institute a system by which to respond properly to them. Depending on the nature of the question, a response may be posted publicly online. For example, if the query concerns the availability of a seasonal flu vaccine, then the response may be given without revealing any personal health information. If the query comes from a patient specifically asking whether he should get the flu vaccine, then a public response would be inappropriate. Direct communication with the patient is necessary.

Institute policies and procedures: If your practice has an online presence for patient or potential patients, you should have a written policy governing the types of information that can be posted and appropriate methods of response for particular questions. Ensure that your staff is trained to monitor and update your site regularly.

Share policies with patients: Physicians who choose to have an online professional presence should explain its purpose to their patients. Emphasize that virtual communication cannot replace in-person visits. Let them

know that you cannot ensure adequate confidentiality online and that you prefer to answer their specific questions directly or by phone. Remind them your website is not monitored 24 hours a day and emergencies should be taken to an emergency department.

Separate personal from professional: While good medical practice is personal and recognizes individuality, appropriate professional boundaries must always be maintained. A practice may benefit from the advertising and community-building potential of having a website or presence on Facebook. Physicians who wish to post their vacation pictures or vent their political views would be wise to create an unassociated page for their personal use. Knowing your doctor is unavailable in March is helpful; seeing him in swim trunks in Mexico may be objectionable.

Stay calm: As for nearly every profession, websites exist that rate physicians and purport to provide detailed profiles. Some providers, irked or even irate at what has been written about them online, require new patients to sign contracts restricting their right to post negative reviews. Such anti-defamation agreements can backfire: there is nothing to prevent web users from publicizing a list of those physicians requiring such contracts. Being known as a physician that imposes a "gag rule" on patients casts its own shadow. Short of correcting libel, physicians may be best off by ignoring these sites.

Whether a particular technology suits a particular practice must be determined by the group or the individual physician. Even if you do not now intend to make use of social media in your professional life, you will find it useful to spend some time online exploring how other physicians have expanded their practice and how patients have gathered information regarding health care and possibly about you. ■