



How to Develop Your Reputation: Social Media and Online Platforms

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#SAAAPM22

@emilysharpe

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DISCLOSURES

Relevant Financial Relationships
None

Off-Label/Investigational Uses
None

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LEARNING OBJECTIVES

Describe risks, benefits, and best practices for professional social media use

Discuss basic social media etiquette and tips

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WHY PHYSICIANS SHOULD BE ON SOCIAL MEDIA



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THE CHANGING LANDSCAPE OF ACADEMIC MEDICINE

<p>THEN</p> <ul style="list-style-type: none"> • Publish a peer-reviewed manuscript • Citations • Lecture • Rumored to have strong educators • Dogma in medical education 	<p>NOW</p> <ul style="list-style-type: none"> • Post-publication dissemination and discussion • Views, Altmetric • Live tweet, blog, podcast • Educators on Twitter • Dogma is challenged daily online
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#MayoGRIT @emilysharpe

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I don't have time for Twitter

You can't communicate anything significant in 280 characters

Tweets are mostly fluff and useless information

I don't know anyone on Twitter, so why bother?

@emilysharpe

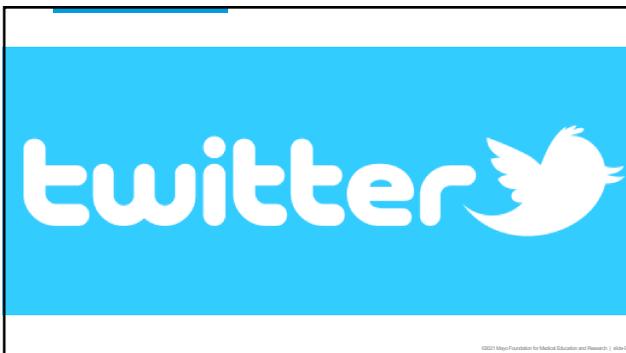
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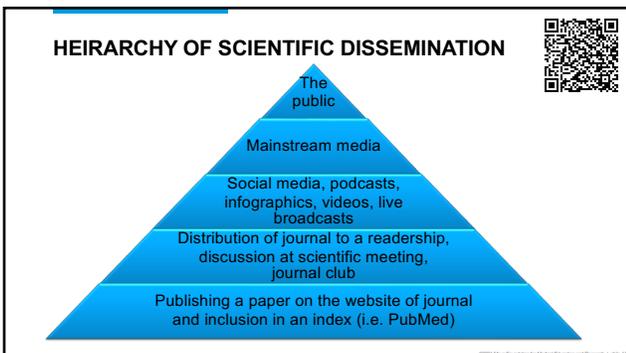
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Why physicians & researchers should be on **Twitter**

Tip for Learning Social Media in your Academic Career! Formatted from Dr. Murray's article: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC411722/>

RESEARCH	Research & Practice Exposure It's great to have your research shared with a wide audience. It's also great to have other people looking at your research. Offer insight by being interactive that can benefit your own research.
GLOBAL INTERACTION	Global Interactions Your research can reach people around the world for their study. Offer feedback and support to other researchers in your field. Be available to help or ask questions. Connect to expand your network.
LIFELONG LEARNING	Lifelong Learning Utilize a lot of resources available to you. Make sure you're staying current on any developments. Stay with all the information you can get to stay on top of your field. Stay up to date on the latest news.

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RESEARCH BENEFITS

- Increase article views
- 11 times more likely to be cited
- Research collaboration
- Research mentorship

Virtual Collaboration	Publications
@AmyPearsonMD @ebmalinzaMD @rekhakutkat @SBHaritageMD @Cindy_Ku_MD	A cross-sectional survey study of United States residency program directors' perceptions of parental leave and pregnancy among anesthesiology trainees
@PerverSultanMD @CarvalB @imgrapes	Longitudinal study evaluating postpartum recovery after scheduled cesarean delivery with the Obstetric Quality of Recovery Tool
@kraus_molly @AmyPearsonMD @ebmalinzaMD @rekhakutkat @SBHaritageMD @Cindy_Ku_MD	Anesthesiology Fellowship Directors Experience and Opinion with Off-cycle Trainees and Parental Leave: A nationwide survey
@AmyOxentenkoMD @Sharonmehayes @SMoeschlerMD @EvinOBrenMD	The representation of women among invited speakers for grand rounds at a large academic medical center
@HoffkampMichael @emmalfrankmd @GraceEKohn @kohlthomas	Predictors of intraoperative pain during cesarean delivery
@EMARJANOMD @Rui_George @LimGrapes @ruftl_landau	#OBAnes: Social Media Trends in Obstetric Anesthesiology During the COVID-19 Pandemic Bucknall. Journal of surgical education. 2017;74(1):79-83 Eysenbach. Journal of medical Internet research. 2011;13(4):e123

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ACADEMIC SCHOLARSHIP IMPACT



Cabrera. J Grad Med Educ. 2017 Aug;9(4):421-425.

Low Impact

- Editor-in-chief (or major editorial duties) of an academic/clinical blog with >2000 page views/month
- Editor-in-chief of an academic or clinical podcast/vodcast > 2000 downloads/views per month
- Top 5% influencers in health care
- Author of a blog post, article, or media piece > 3000 views with no DOI
- Author of a blog post, article, or media piece > 1000 views with DOI

Medium Impact

- Editor-in-chief of an academic or clinical blog > 5000 page views per month
- Editor-in-chief of an academic/clinical podcast/vodcast > 5000 downloads/views per month
- Editor-in-chief or manager of a social media network > 10,000 active users
- Author of a blog post, article, or media piece > 15,000 views with no DOI
- Author of a blog post, article, or media piece > 7500 views with DOI

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ACADEMIC SCHOLARSHIP IMPACT



Cabrera. J Grad Med Educ. 2017 Aug;9(4):421-425.

High Impact

- Editor-in-chief (or major editorial duties) of an academic/clinical blog with >20,000 page views/month
- Editor-in-chief of an academic or clinical podcast/vodcast > 20,000 downloads/views per month
- Editor-in-chief or manager of a social media network > 50,000 active users

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GLOBAL INTERACTION

Healthcare Tweet Chats

212,732 tweets

Sunday Mar 22nd

4000M	#icanarc	Australia, healthcare social media, New Zealand	1,381
3000M	#HivxAc	public health, Public Journal Club	186
3000M	#ashat	add, autism, autism spectrum disorders, neurodivergence, neurodiversity	
4000M	#iqdshat	Borderline Personality Disorder	
8000M	#womeninmedicine	Gender, Gender Equality, Healthcare Improvement, Healthcare Leadership	
9000M	#PSTAI	mental health, Prevention, suicide, Suicide Prevention	

Trending

1. #AnesJ
2. #ICDM
3. #HivxAc
4. #WOMAN
5. #HivxAc
6. #ICDM
7. #WOMAN




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NETWORKING FOR INTROVERTS

#MOTTIRL



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Emily Sharpe, MD @emilysharpe · Aug 24

Another #OBAnes poll for an upcoming talk at the AOCA Annual Convention:

How would you secure the airway for an urgent CS in a laboring parturient?

Direct laryngoscopy & ETT	38.3%
Video laryngoscopy & ETT	60.8%
Supraglottic airway (LMA)	1%

209 votes · 1 day left

Emily Sharpe, MD @emilysharpe · Aug 24

OBAnes #Airway Poll #AOCA

When trying to secure the airway for a cesarean under GA, you are unable to place an ETT (Bailed DL and Glides). What is your backup airway of choice?

Facemask +/- oral airway	4.4%
Supraglottic airway (LMA)	85.8%
FiO2eroic	6.0%
Surgical Airway	2.8%

360 votes · 23 hours left

Emily Sharpe, MD @emilysharpe

Emily Sharpe, MD @emilysharpe

#Anesthesiologists what would you do (For my #MayoAnesUpdate19 lecture) G2P1 39w+5 weeks, spontaneous labor, 5 cm, BMI 40, h/o "incomplete epidural" w/ first delivery. What technique will you perform?

Epidural	32%
CSE	37%
DPE	17%
Spinal	14%

69 votes · 1 day left

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LIFELONG LEARNING

Dr Andrea Strathman @DrStrathman

Things I didn't expect to say to my resident today: "Hang on, let me find this reference about zofran and spinal in OB. I don't know what journal it was in- saw it on Twitter." 🙄

@emilysharpe for the win!
@SOAPHQ
#MedTwitter

6:29 PM · Aug 24, 2020 · Twitter for Android

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LinkedIn

- Have a professional profile photo
- Optimize Your Profile Headline
- Refresh your 'About' summary (1st person)
- Be open to recruiters for future career opportunities
- Update your skills section

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PITFALLS OF SOCIAL MEDIA

- Violating patient confidentiality
- Permanent
- Lack of context/tone/ability to explain
- Trolls
- Responding to Negative Tweets
 - Ignore
 - Challenge or Argue
 - Apologize and Resolve



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TIPS FOR IMPROVING YOUR SOME IMPACT

- Tweet "hot" and/or timely topics
- Personal Twitter accounts foster higher engagement than organizational or business accounts.
- Media attachments increase tweet engagement by a factor of three.
- Create advanced "buzz" before a Twitter event



George. Can J Anesth (2017) 64:1169-1175

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THE RULES OF SOCIAL MEDIA

- Do not fear social media
- Never post when angry
- Strive for accuracy
- When in doubt, pause
- Don't post anything that can identify a patient
- Ask for permission
- Be respectful
- Assume beneficence
- Beware of friending patients
- Educate yourself




<https://www.kevinmd.com/blog/2013/05/10-simple-rules-doctors-social-media.html>

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QUESTIONS & ANSWERS



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