IMO Position Paper on Social Media
Mission Statement

The role of the IMO is to **represent** doctors in Ireland and to **provide** them with all relevant services.

It is committed to the **development** of a caring, **efficient** and effective Health Service.
IMO Position Paper on Social Media

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IMO Guidance: Utilising social media and other interactive online applications

Social media and other interactive online applications are dynamic and constantly evolving dimensions in modern society. These applications often cross public and private domains, inextricably linking both professional and personal lives.

While medical ethics and professionalism are topics that arise at both undergraduate and postgraduate level in medical education, the growth of social media and other technology that facilitates online interaction between individuals is a new and continuously developing environment that requires appropriate education and consideration to ensure a professional approach to its use.

For the medical profession, interaction with these media should always generate the same level of consideration to professional standards as any other public situation, particularly as the online environment is now another channel of information that has the capacity to inform the public perception of the medical profession.

It is often easy to forget or disassociate the online environment from being a public arena, particularly while it may just be you using your PC, smartphone or tablet. However, you should always be mindful that the content you generate on sites can reach a public domain regardless of your intention for the information to be public or private.

This guidance is aimed at doctors and medical students who interact with social media and other online platforms both professionally and personally to remain fully aware of the both the positive and negative implications of their online actions. Doctors and medical students can certainly enjoy using social media and other interactive applications in both their professional and personal lives; however this guidance aims to promote consciousness about possible conflicting situations and considerations to professionalism in their interaction with such platforms.

Social Media - ‘Like’

There are obvious benefits to employing the use of social media and other interactive online applications.

- **Medical Education:** As the delivery of medical education advances with the improvements to online education systems, doctors and medical students may utilise online applications that are easier to access and more practical to their working requirements which may include accessing seminars online; online knowledge assessments or even CPD/CME activities. Online journals and medical forums along with blogs are all increasing to help progress debates and provide alternative information sources for doctors and medical students.

- **Professional Networking:** Online professional networking is becoming more and more prevalent, and has the possibility to extend over geographical boundaries that may have previously hindered networking. Doctors with specialist interests may link with colleagues around the world, and employment and training opportunities can reach a wider audience.

- **Patient benefits:** Doctors can refer to reputable online resources and support sites for particular disease groupings, relative support and other informative resources.

- **Personal:** As a communication and personal networking tool, social media has many benefits to the individual, and can be accessed at any time of day or night. Many people access and develop interests online, particularly given the mobility of technology where individuals can access online platforms from a variety of electronic tools.

The Crossover: When Private Becomes Public

While there are clear benefits to using social media, there can be unintended consequences when your private life suddenly becomes public. While you should always check your security settings (and ensure any updates do not impact on your settings), you should never rely on such settings to be absolute, as there is always the possibility that these can be breached. Therefore, you should always consider the potential professional implications of the content that you post. Remember that regardless of intention, social networks and interactive online applications are made for sharing
information – know the audience and the security settings that are required to ensure your information is kept safe, and if in doubt always take a conservative approach.

This can obviously be difficult to manage, particularly in regional areas where there is often a crossover of your social and professional life. You should treat your interactions online no differently than what you do in the physical world, with the same considerations to professionalism.

Confidentiality

While the Medical Council does not specifically address social media or other interactive online applications, you should consider their Guidance on Professional Conduct and Ethics for Registered Medical Practitioners and apply such guidance to your conduct online. Of particular relevance are Sections 16 (Personal relationships with patients) and Section 24 (General principles of confidentiality). Please see Annex 1 for further detail on these sections.

Doctor Patient Confidentiality – IMO Position Paper April 2011

Confidentiality is central to trust in the doctor-patient relationship. Doctors diagnose and treat illness based on information given to them by the patient in confidence. Confidentiality is a necessary pre-requisite which allows patients to communicate their symptoms, experience, beliefs, concerns and expectations about their illness and their treatment. Confidentiality is essential to safeguard a patient’s dignity, privacy and autonomy and extends after death. The safeguarding of patient confidentiality is a fundamental principle of medical ethics which dates back to the Hippocratic Oath. Confidentiality is both a patient’s right and a doctor’s duty.

Always remember that doctor patient confidentiality extends to social media and interactive online platforms. Normal consent procedures apply online, just as they do in any other situation. While many doctors take this as a given point, there are a number of situations around the world that have demonstrated a breach of the relationship through social media and other interactive online platforms.

Therefore it is advisable that you:

- Avoid adding/accepting your patients and their relatives into social networks
- Only add/accept people that you know and trust into your personal social network.
- Avoid posting content regarding patients. Even if they, their case, symptoms etc have been anonymised, there is still the chance of identification. No content on social networking sites should ever reference patients or their specific case.
- If you are posting content for the specific purpose of medical education or for purposes related to the care of a patient, careful consideration about the case, the patient and the accessibility of the information you are posting should be thoroughly contemplated before proceeding with action. While there may be legitimate instances to present a particular case (e.g. a closed discussion forum on a particular disease grouping), if any content you post that leads to the identification of the patient without their consent it may be considered to be a breach of confidentiality.

Digital legacy: The Footprint

Doctors and medical students should always be wary of the digital legacy they leave on the internet. Anything that has once been typed or posted and immortalized on the internet can always resurface. While journal articles, medical blogs and medical education platforms may be positive contribution to the advancement of the profession, there may be images or personal views that could surface at any time and could have serious implications for your professional career, particularly for future employers.

2 Irish Medical Organisation, Doctor Patient Confidentiality, April 2011 www.imo.ie
Therefore it is advisable that you:

- Always take a conservative approach when posting content anywhere on the internet. You can never be sure where or when this information may return, or in what context. The online environment can be manipulated and can often remove or supply alternative contexts than what was originally presented.

- Social media often allows others to post content about you. Ensure you have the appropriate settings on your account to a level that you are comfortable with and always bear in mind the limitations of such settings. If you are unhappy with content that appears about yourself, take action to correct it.

- If you become aware of something regarding a colleague and you have concerns regarding their professional conduct, bring this to their attention to be dealt with, particularly if you believe they are unaware that it is public knowledge.

- Defamation can extend to the internet; remember casual conversations or posts online involving a colleague or patient could be damaging to both yourself and the person involved.

- Routinely check your own internet presence to ensure that you are satisfied that the information about you is accurate and appropriate, particularly if that information is not posted directly by you.

- Give serious consideration to how you present content online, particularly if you are discussing professional matters online but in a public context (e.g., producing or commenting on online articles, blogs, or professional pieces). This is particularly pertinent when online written content cannot be attributed with inflection or vocal tone.

**Conclusion**

The internet and its many functions allow doctors and medical students to interact socially and professionally. While there are many benefits to such interaction, you should always consider your online presence and the possible impact to your patients and your professional career. Doctors have a unique standing in the community that is built on trust with patients. While it may be easy to forget how public the online environment is, always be cognisant of your actions and take appropriate measures to ensure your own privacy and that of your patients at all times.

**IMO Guidance on the use of Social Media**

- Avoid adding/accepting your patients and their relatives into social networks
- Only add/accept people that you know and trust into your personal social network.
- Avoid posting content regarding patients. No content on social networking sites should ever reference patients or their specific case.
- If any content you post leads to the identification of the patient without their consent it may be considered to be a breach of confidentiality.
- Always take a conservative approach when posting content anywhere on the internet.
- Ensure you have the appropriate settings on your account to a level that you are comfortable with and always bear in mind the limitations of such settings.
- If you are unhappy with content that appears about yourself, take action to correct it.
- If you become aware of something regarding a colleague and you have concerns regarding their professional conduct, bring this to their attention to be dealt with.
- Defamation can extend to the internet.
- Routinely check your own internet presence to ensure that you are satisfied that the information about you is accurate and appropriate, particularly if that information is not posted directly by you.
- Give serious consideration to how you present content online, particularly if you are discussing professional matters online but in a public context.
ANNEX 1

16  Personal relationships with patients
16.1  Your professional position must never be used to form a relationship of an emotional, sexual or exploitative nature with a patient or their spouse or with a close relative of a patient.

24  General principles of confidentiality
24.1  Confidentiality is a fundamental principle of medical ethics and is central to the trust between patients and doctors. Patients are entitled to expect that information about them will be held in confidence. You should not disclose confidential patient information to others except in certain limited circumstances outlined in paragraphs 26 to 30 [of the Guide].

24.2  Patient information remains confidential even after death. If it is unclear whether the patient consented to disclosure of information after their death, you should consider how disclosure of the information might benefit or cause distress to the deceased’s family or carers. You should also consider the effect of disclosure on the reputation of the deceased and the purpose of the disclosure. Individual discretion in this area might be limited by law. See also paragraph 18.3 in relation to dealing with adverse events.

24.3  You should ensure as far as possible that the patient’s privacy is maintained at all times and that accidental disclosure of confidential information does not occur.

24.4  You should ensure as far as possible that confidential information in relation to patients is maintained securely and in compliance with data protection legislation.

References

World Medical Association, 2011; WMA Statement on the Professional and Ethical Use of Social Media, World Medical Association www.wma.org

Irish Medical Organisation, Doctor Patient Confidentiality, April 2011 www.imo.ie
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