

Review Article

Social Pathologist and Code of Conduct

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ABSTRACT

We have integrated social media into our lives by choice and we in the medical practice, amidst our busy schedules, have been using it for easy connectivity with friends and families and also, if not importantly, for our continued education. With the advent of digital pathology the image sharing has become much easier. This has been further expedited by cameras on the smart phones and editing apps. We have several groups dedicated to numerous subspecialties in pathology and they make peer reviewing and sharing of images, articles and relevant advances relatively easy. However, like all human endeavors, the lines can be crossed. Hence balance has to be maintained regarding patient privacy and our own professional needs. American College of Physicians and the Federation of State Medical Boards has proposed guidelines for the same. These guidelines will be amended and improved in future with technical advances.

Key words: Facebook; Guidelines; Instagram; Hashtag; Pathology; YouTube

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Submitted: 12th January 2018

Accepted: 4th April 2018

Published: 1st June 2018

Conflict of Interest: None

Sources of Support: None

Citation: K C Geetika. Social Pathologist and Code of Conduct. Nep Med J. 2018;1:39-42. DOI: 10.3126/nmj.v1i1.20399



INTRODUCTION

“We co-create our reality with others in unseen ways.” — Doug Dillon

“The need for connection and community is primal, as fundamental as the need for air, water, and food”- Dean Ornish

All of us know internet is a boon since its progressively rampant existence from 1980s. We are baffled at every stage with the amount of integration and availability of it. We cannot deny its omnipresence. The internet provides a vast arena of educational materials for all age groups and genera's. Medical field is not aloof from it. Since we all need to be abreast with the latest developments in our field, the online materials are very

advantageous, mostly because they can be accessed easily. Apart from the conventional educational materials such as journals, a vast range of other educational materials are also available. There are several sites dedicated to each medical specialty.

In pathology too we can find several of those sites. Some of them include materials without much interaction from the visitors, for example, PathologyOutlines.com, while others provide variable amount of interactions such as Pathology Resident Wiki, PATHO-L and social media. Social media includes several platforms to exchange information. The popular social medias are Facebook, Instagram, Periscope, Youtube, linkedin, snapchat,

google+, pinterest, scoop.it, StumbleUpon and Twitter.¹ We have been using social media extensively for our entertainment and learning. Most of us joined it and profession related groups in it to know people in the field of our interest. In this review article we try to analyze what are the aspect of social media that can be utilized for your professional growth and also how can be safe guard ourselves while doing so.

WHY IS SOCIAL MEDIA POPULAR IN PATHOLOGY ?

Pathology deals with the diagnostic aspect of a disease and needs excessive amount of visual interpretation. We go through slides under the microscope and even have facilities to take digital images of each. A whole new area called digital pathology has emerged as a result of this. The digital images can be easily uploaded over the internet and shared. Unlike telepathology which can have its technical difficulties, the images can be uploaded from smart phone it self. Smart phone, these days, with their high quality cameras are effectively used to take pictures of the microscopic slides. Several studies have been based on smartphone application in some of sub-specialties of pathology.^{2,3} Specific lectures are dedicated in improving the images obtained by smartphone in YouTube and dealing with white balancing of the pictures taken, as well as size specificity of the images in the several sites like Facebook and twitter. Another important aspect in image sharing is to maintain its source of origin by watermarking. This can help in getting the necessary credit a good image needs in formal publication as well as online sharing.⁴

ADVANTAGES OF SOCIAL MEDIA

Hence, social media has bridged the gap between image sharing and digital pathology. First and foremost advantage of use of social media in pathology is immediate availability of its content followed by the bulk of impact it creates. This has been well presented in the article written by Dr. Crane and Dr. Gardner.⁵ Apart from that several aspects of continuing education can be addressed by social media such as.¹

- Relevant and rare cases can be collected from social media for publication, lectures and textbooks within a considerably less time compared to the old conventional methods:
- For example: A clinical photo of hiDr.adenoma papilliferum was required for publication in a book for which Dr. Gardner posted a request on the Dermatopathology Facebook group and received the photography within hours from a colleague from Ecuador, Juan Carlos Garc' es, MD
- Several relevant discussion groups can be created such as dermatopathology (more than 21,000 members), breast pathology and bone and soft tissue pathology (more than 18,000 members).⁴
- Discussions and comments in social media such as Facebook and twitter can bring out the future topics of discussion as well as be an academic learning too in itself.
- An impact factor of a publication, linked in a twitter or Facebook, can be increased as the number of viewers increases dramatically compared to the conventional methods.
- Young doctors get a chance on leadership in academic activities rather than waiting for several years to be seniors and make an impact. For example Dr. Gardner was promoted

serve as chair of social media subcommittees for the American Society of and also appointed as a deputy editor-in-chief of the Archives of Pathology & Laboratory Medicine for his social media skills.⁶

- Social media is being embraced in an academic institutes for evaluation and promotion activities as well.
- For example: Dr. Gardner was recently promoted based on his publication which relied on social media survey. He had done a survey asking to rate his teaching activities, leadership skills and the impact it created in providing better care to their own patients, to his followers. Within 4.5 days of first posting it on social media, he had follower from more than 80 different countries participating and 1000 out of 1100 of the responders gave a positive feedback.
- The impact and rapidity of spread of information social media can create is exponential compared to traditional methods as proven by the example given above.
- Journal clubs such as @Path_JC and @NephJC in Tweeter gives a depth of understanding to the journal being discussed amongst the experts and enthusiasts from around the world.^{7,8}
- Invited lectures from experts can be view form home or office via social media services, such as Periscope and YouTube (San Bruno, California). For example lectures given on periscope by Dr. Fuller, Dr. Gardner and Dr. Mukhopadhyay's have been popular.⁹ Social media offer a medium of exchange of information between pathologists, physician and patients. The images can be peer reviewed in a group specific to subspecialties. For example, we have Dr. Mckee dermatopathology group in Facebook where we can post interesting cases for the peer review. However, in peer review there is potential for "crowd sourced" review rather than experts in some of the cases.⁵
- It is a medium for growing pathologists to be known in the community of national and international pathology.

Apart from all of the above mentioned aspects, Facebook live feature has enabled pertinent organizations such as USCAP to post live videos dealing with diagnostic aspects of pathology (workshops with slide viewing). This is a huge learning opportunity for pathologists like us from underdeveloped nation where we work in under resourced environments. Twitter is a popular media with several subspecialty interest groups such as nephrology journal clubs that has more than 3,000 followers.¹⁰ Some other groups include as Gross pathology(#Grosspath), Pathologist selfies at the USCAP annual meeting (#IamUSCAP), Cytopathology(#Cytopath), Dermatopathology (#DermPath) and Endocrine pathology (#EndoPath). #hashtags are used to find feeds and searches and several of these are listed in the site <https://www.symplur.com/healthcare-hashtags/ontology/pathology/>.¹¹ This website also give lists of trending #hashtags: #Pathology, #GIPath, #dermpath, #Cytopath, #NeuroPath and #Gynpath. Of particular interest can be a journal club, #pathJC, moderated by the authors on specific given time. The degree of discussion under a # hashtag or a group can be analyzed. In YouTube too there are several videos dedicated to pathology starting from basic pathology¹² to sites specifically dedicated to dermatopathology and bone and soft tissue pathology by Dr. Gardner.¹³ These videos are like attending lectures and have immense impact on the understanding of specific areas.

The amount of knowledge that is flowing through all of these sources is explosive. Specially for pathologists working in countries like ours, to be able to interact with well known and established figures in a personal basis is simply amazing!! No need to go and find emails though university sites and write emails

waiting indefinitely for queries to be answered. Just # tag and get going.

WHAT ARE THE CAUTIONS WE NEED TO TAKE?

Social media has become a two edged sword. We have all the age groups engaged in it giving us the typical social status of “alone together”. Like Erik Qualman said, “we don’t have a choice on whether we do social media, the question is how well we do it”. We cannot run away from it. The biggest problem we have recently faced with social medias like Facebook, is that we trust it with our information spending our time and attention like a faithful partner. Sadly it can be a one sided affair. Not only can we face the general problem of information leakage and misused, we can also face challenges regarding our own specific profession. The consultation we get for our shared images are usually informal once and might be diagnosed at a glance. How much value we give to them will depend upon the individual giving the diagnosis as well as our line of thinking, given that we are looking at the whole slide. However, like the peer reviews done under the microscope the value of the reviewed images cannot be under estimated.

The way we conduct ourselves in social media can have an impact in our professional life. In a study done by Brissette et al, on unprofessional behavior in pathology fraternity, it was found that following 3 behavior were high on the list: a) unwanted comment about a physician colleague was made on social media (by residents 91% [n ¼ 172 of 190]; Program directors(PDs) 93% [n ¼ 52 of 56]); b) personally identifiable patient information and/or case images were posted on social media (residents 97% [n ¼ 183 of 189]; PDs 96% [n ¼ 54 of 56]); C) disapproving comment about support staffs were made on social media (residents 92% [n ¼ 174 of 189]; PDs 96% [n ¼ 52 of 54]).¹⁴

The thing to understand here is that what ever goes to the web is fleeting yet permanent.¹⁵ Hence, some guidelines have to be in place in order to avoid the violation of doctor patient relation as well as the basic medical code. In 2014 The Lancet Oncology had reported in their journal that one in seven of the doctors had patients in the friends list on Facebook.¹⁶ Hence the line between the patient and the doctor can be blurry. We should try and think through each pictures and information that goes into the social media as a patient property. Hence, when making them available in social media we should try to make it clinically relevant and keep the identity of the patient ambiguous, unless consented for. For example we can round up the patient’s age to the nearest decade, change anatomic site, or clinical history in relevant manner.⁵

American College of Physicians (ACP) and the Federation of State Medical Boards (FSMB) have together issued guidelines on online medical professionalism in 2013 as a starting point inevitable for amendment with future technological advances.¹⁷⁻¹⁹ Following are the guidelines:

1. “Use of online media can bring significant educational benefits to patients and physicians, but may also pose ethical challenges. Maintaining trust in the profession and in patient-

physician relationships requires that physicians consistently apply ethical principles for preserving the relationship, confidentiality, privacy, and respect for persons to online settings and communications”

2. “The boundaries between professional and social spheres can blur online. Physicians should keep the two spheres separate and comport themselves professionally in both”
3. “E-mail or other electronic communications should only be used by physicians in an established patient-physician relationship and with patient consent. Documentation about patient care communications should be included in the patient’s medical record”
4. “Physicians should consider periodically “self-auditing” to assess the accuracy of information available about them on physician-ranking Web sites and other sources online”
5. “The reach of the Internet and online communications is far and often permanent. Physicians, trainees, and medical students should be aware that online postings may have future implications for their professional lives”

The more we start looking into the web on “social media and pathology” the hungrier you gets. I never knew the career that was supposed to be very humbling is very social one too. The take home message here is , pause before posting and reflecting on how to respect and protect doctor patient relationships irrespective of “when” and “where” is highly recommended.¹⁶ We should always ask our selves the pertinent question of how we would conduct ourselves in a particular situation, if we were in front of a real patient?¹⁵

Dr. John Mandrola, has laid out “Ten Simple Rules for doctors on Social Media”²⁰ which can be very useful:

1. Do not fear social media
2. Never post anything when angry
3. Strive for accuracy
4. When in doubt, pause. Sleep on it. Re-read it.
5. Don’t post anything that can identify a patient
6. Ask permission
7. Be respectful
8. Assume beneficence
9. Be careful “friending” patients online
10. Educate yourself and ask questions

CONCLUSIONS

Social media is a tool used for lifelong learning and academic sharing which has an indefinite and eclectic impact. Our aim while using social media should be to create a balance between patient doctor relation and our own professional interest. Social media guidelines will change with the technological advancement; however they are inevitable for maintaining our professionalism and for the greater good.

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