

# LETTER TO THE EDITOR

## Patients & Doctors - Facebook Friends?

To the Editor of the Osteopathic Family Physician,

It has been over a month since I left the area I had practiced Family Medicine for over nine years. During that time I had the privilege to take care of numerous patients. When I was in the process of changing jobs, I consulted a lawyer and followed his advice regarding informing patients of my departure. Since I have left, I have been astonished by the number of Facebook friend requests and other ways former patients have tried to contact me. I do have a personal Facebook page, which is in the private setting, and most of the requests have come through this aspect of social media. With these requests, I have been confused on how to handle this situation. In my research, I am not alone. My question is regarding what to do in the case of patients contacting their former or current doctor on Facebook.

Many articles have been written about what a doctor is to do when contacted by patients to be “friends” on social media. An example of this was in the Curbside Consultation of the American Academy of Family Physicians in 2011 when an active social media family physician user was “friended” by her patient.<sup>1</sup> In this article the author, Dr. Chang Chretien stated that “regarding universally accepted standards for interacting with patients using social media, it is kind of like the Wild West.”<sup>1</sup> This article was published in 2011, and although a lot of medical societies and specialty colleges have released guidelines on this subject since then, it can be confusing for the clinical practicing physician. A study showed that “13 of the 28 [US medical schools] have publically available student guidelines or policies giving explicit guidance on social media.”<sup>2,3</sup> This is in contrast to the 95.45% of US medical schools website having a Facebook presence.<sup>2</sup>

Social media use is expanding, as is the internet in the practice of medicine. There are “dangers and opportunities for social media [use] in medicine.”<sup>3</sup> An estimate from 2011 showed that approximately 90% of physicians use social media.<sup>3</sup> With these type of statistics, the numbers can only go up in 2018. Particularly among young physician, social media is getting more popular and evolving.<sup>4</sup> There is a lot of new found opportunity for social media

use in medicine. There is a sense of community that can develop, and many positives can come about with this increase in use. These positives can especially be noteworthy in socially isolated areas, and many rural areas.<sup>3</sup>

Patients can be confused on certain aspects of social media and diversity exists about what is deemed appropriate in the internet world. Some hospitals have been using social media to promote their services and goals.<sup>3</sup> With this happening, the patient can question if the hospital uses Facebook why can't the physician? Problems arise when the patient and physician experience “blurred boundaries.”<sup>5</sup> As Dr. Chang Chretien told the patient who questioned if she should be friends with her patients, she should be “cautious.”<sup>1</sup> With social media, there is always a risk of patient confidentiality being violated.<sup>6</sup> If you are “friends” with a patient on social media, they can see everything you post. With all of these potential issues, it is recommended doctors know their “digital footprint.”<sup>6</sup> A New Zealand study revealed that many doctors did not know the privacy setting of their Facebook account.<sup>7</sup>

Some patients do not realize the blurred boundaries and issues social media may cause. I think it is easy to “friend” someone and have gotten a variety of reactions when asking colleagues if this has ever happened to them. Some patients may feel a significant connection to their physician, even after their physician has left practice, and may want to stay in touch. But there are boundaries and the nature of our profession is such that there are risks to interactions outside of the doctors' office.

Since social media carries social, ethical, and professional risks<sup>9</sup> it is important to realize all the possible potential problems with online access to patients. The AMA Journal of Ethics released an article outlining “Professional Guidelines for Social Media Use - a Starting Point.”<sup>9</sup> In this article, the guidelines released by the Federation of State Medical Board (FSMB) and the American College of Physicians (ACP) were presented.<sup>9</sup> The Federation of State Medical Board (FSMB) – “Model Guidelines for the Appropriate Use of Social Media and Social Networking in Practice” reiterated the importance of professionalism, privacy, and awareness of the possible pitfalls of social media. The summary described examples where social media and the physician can have issues.<sup>10</sup> These guidelines serve to remind the physician of the ethical considerations that occur when using social media.<sup>10</sup>

As osteopathic family physicians, we have the privilege of taking care of patients. In a way, we already enter into a relationship with a patient the minute we walk through the exam door. Whether the osteopathic family physician chooses to communicate with their patients in a controlled, safe setting through social media avenues is their choice. There are guidelines available to help the physician see the dangers of social media, and also its potential positives. So the answer to the question outlined in the beginning of this article has not been answered. It is a personal choice, one that is not clear-cut, but neither is most of medicine. I am curious as to the number of osteopathic family physicians also experience this issue, and what they do in a similar situation.

*B. Riley*

Bernadette Riley, DO, FACOFP, FILM  
Associate Professor  
Department of Family Medicine  
NYIT College of Osteopathic Medicine  
Northern Blvd, Old Westbury, NY, 11568  
Phone 516 686- 3989  
Fax 516 686 3748  
[briley@nyit.edu](mailto:briley@nyit.edu)

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