

## Social media to support physician practice and CPD: Opportunities, issues, and an emergency medicine case study

The use of social media is rapidly growing for medical education and practice sharing, and emergency medicine has been on the forefront of these developments. However, there is limited published information about social media's role in CPD and there are challenges in its use for CPD that educators and learners need to be mindful of.

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**S**ocial media, collectively defined as interactive web-based tools for computer-mediated communication,<sup>1</sup> has had a growing impact over the past decade as a platform for sharing medical education and practice approaches among health professionals. A recent article that discussed the benefits, risks, and opportunities in leveraging social media for the education of health professional trainees<sup>2</sup> highlighted a relative lack of evidence in the literature for using social media in support of continuing professional development (CPD) for practising health professionals. This article intends to illuminate how social media has been effectively used among practitioners in the discipline of emergency medi-

cine<sup>3</sup> and highlights some good practices of CPD in this field. The insights gleaned will be instructive not only for other medical specialties but also for the design and implementation of a social media network for doctors practising emergency medicine in BC as a core component of a provincial Emergency Medicine Network that the University of British Columbia Department of Emergency Medicine is establishing.

### Opportunities and challenges

Active and longitudinal participation in CPD is a cornerstone for physicians to maintain competence and excellence in their practices, as espoused by both the Royal College of Physicians and Surgeons of Canada<sup>4</sup> and the Canadian College of Family Physicians.<sup>5</sup> Online CPD activities have been recognized as useful approaches to CPD,<sup>6-8</sup> with advantages in terms of improved access and convenience over in-person CPD activities. Social media can be considered a special form of online CPD by introducing additionally novel educational principles such as constructivism and connectivism.<sup>2</sup>

Studies have suggested that physicians hold a positive attitude toward

technology and social media, though this sentiment is not ubiquitous.<sup>9,10</sup> Many studies with small sample sizes and surveys of convenience samples described the popularity and utility of different social media platforms for education. In countries where there are no restrictions to the Internet and social media, Twitter, blogs, podcasts, and media translation platforms such as YouTube consistently rank highly. While Facebook is popular with many physicians for personal use, they would not consider this platform for professional purposes.<sup>9,11,12</sup> Arguments in favor of using social media as part of medical practice point to its ability to help people stay connected, reach and network with a larger audience, and share knowledge; the ease of accessing CPD; benchmarking (becoming aware of new clinical practices); and opportunities for personal branding.<sup>9</sup> However, there are also concerns raised—the difficulty of maintaining confidentiality, lacking time for active participation, the challenge of establishing trust of authorship or comments from contributors, difficulty gaining workplace acceptance and support, and information anarchy (i.e., lacking a formal information management policy and difficulty finding relevant information).<sup>9</sup>

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## Social media in emergency medicine

Dr Mike Cadogan, an author at the popular Australian blog/website Life in the Fast Lane (LITFL), has coined the term “free open access medical education” (FOAM) as the important principle that underpins the use of social media for medical education.<sup>3,13</sup> FOAM does not refer to one specific platform but rather to a collection of resources that are based on social media.<sup>11</sup> The popularity of LITFL attests to it being a contemporary staple for emergency medicine practitioners and trainees alike. The LITFL website also provides an extensive (but still not exhaustive) list of emergency medicine and critical care blogs for interested individuals to discover and follow.<sup>14</sup>

A major issue of debate in the literature about FOAM (and about social media for CPD in general), which consists primarily of opinion pieces and observational studies, focuses mainly on peer review and its influence on knowledge dissemination. It has been suggested that the current system of peer-reviewed publication—in which it takes months for articles and letters to the editor to be published—may be too slow to promote effective and timely knowledge dissemination. Most journals are now publishing articles online ahead of in print and encouraging open and online discussion through various forms of social media. While the opinions expressed in online discussions are not peer reviewed prior to being released, experts in their field are able to expedite the commenting process based on both the evidence presented and personal experience, and shed important insights to bridge the gap between literature and application in clinical practice. Further, social media facilitates global discussion in real time, something that articles in print journals cannot replicate.

One study has touted the influence of social media in garnering input and

discussion from individuals who were not physically attending an emergency medicine conference.<sup>15</sup> Two other studies on the Global Emergency Medicine Journal Club showed a rapid increase in the use of social media in consecutive years of study—a 47% increase in participant traffic from the first year to the second year was noted. Authors of the articles being discussed could also engage in real time with participants of the journal clubs on a global scale.<sup>16,17</sup> Furthermore, a systematic review of journal clubs that are accessed via microblogs indicated that Twitter-based journal clubs are an expanding method of CPD and a unique way for those with busy schedules to engage.<sup>18</sup>

However, a noteworthy counterpoint to the benefits of social media is that opinions skew toward the more extreme in forums where there is a low volume of traffic. Various solutions have been proposed to counter this challenge, such as introducing clinician moderators and forums for discussion to promote expression of a variety of opinions, but no approach has been accepted broadly.<sup>11,19,20</sup>

Providing CPD credits for social media use may lead to its increased acceptance. For example, Dr Scott Weingart has an active website and conducts popular podcasts titled EM-Crit on emergency medicine and critical care topics. While access to some of the materials is free, registration and payment is required to gain access to all the content and to obtain CME credits.<sup>21</sup> A local example is the UBC website, This Changed My Practice, where physicians are able to gain CME credits by reading posts from guest authors that focus on scientific literature that changed their patient care practices.<sup>22</sup> Formal research studies to validate the effectiveness of these models and their impact on changing clinical practice behaviors are lacking.

Overall, the use of social media to support practice and CPD has become

more prevalent over the past decade, and it will continue to become more popular as an approach physicians use to maintain clinical excellence. It has even been asserted that a clinician’s influence on the medical world will eventually be heavily reliant on their online presence and ability to generate online content.<sup>20</sup>

## Social media in emergency medicine in BC

More research is needed to further evaluate the benefits of using social media for CPD. With this in mind the UBC Department of Emergency Medicine launched a social media strategy focused on exchanging emergency medicine practice tips relevant to British Columbia. Our Facebook page is BC Emergency Medicine, and our Twitter handle is @BC\_Emerg. We welcome interested physicians to join and provide insights, suggestions, and thoughts on how we can leverage this platform to support excellence in emergency medicine practice in BC, facilitate the exchange of knowledge, and provide excellence in health service to our patients. For access to the BC Emergency Medicine Facebook group, search for the group on Facebook and click Join to request access.

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## college library

### CME credits for using library resources

**D**id you know that when you send a clinical query to the College Library you can obtain CME credits for reading the articles sent in reply? Each bibliography sent by College librarians contains links to instructions for registering the literature search with the College of Family Physicians of Canada (CFPC) or the Royal College of Physicians and Surgeons of Canada (RCPSC).

College registrants may submit a clinical query using the online literature search request form ([www.cpsbc](http://www.cpsbc.ca/literature-search-requests)

[.ca/literature-search-requests](http://www.cpsbc.ca/literature-search-requests)), or by phone, fax, e-mail, or mail. Be sure to indicate any deadlines so we can schedule your search appropriately.

The College Library also provides a course on searching the literature, in partnership with UBC Continuing Professional Development. There is a fee to attend the course, but participants receive a CME certificate accepted by both the CFPC and RCPSC. Upcoming sessions of this course, called Finding Medical Evidence, may be found on the UBC CPD website at <http://ubccpd.ca/courses>. If the scheduled times and locations don't work for you, the course is also available by request (either on-site or online).

If you listen to Audio-Digest lectures, you can also obtain CME credits for this activity. Eleven Audio-Digest series are available, including Family Practice, Psychiatry, Internal Medicine, and more. Instructions for downloading Audio-Digest lectures are available on the College Library website at [www.cpsbc.ca/library/search-materials/audiovisual](http://www.cpsbc.ca/library/search-materials/audiovisual) (login required). To obtain CME credits, test papers may be purchased directly from Audio-Digest.

For more ways to earn CME credits, visit the library's guide at [www.cpsbc.ca/library/cpd](http://www.cpsbc.ca/library/cpd).

—Niki Baumann  
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*This article is the opinion of the Library of the College of Physicians and Surgeons of BC and has not been peer reviewed by the BCMJ Editorial Board.*