



**Position Statement
on Medical Professionalism in the Use of Social Media
(Approved by the Board of Directors: April 28, 2018)**

As stated in the AMA *Code of Medical Ethics Opinions on Observing Professional Boundaries and Meeting Professional Responsibilities*, participating in social networking and other similar internet opportunities can support physicians' personal expression, enable individual physicians to have a professional presence online, foster collegiality and camaraderie within the profession, and provide an opportunity to widely disseminate public health messages and other health communication.

The American Academy of Dermatology (Academy) encourages participation and open dialogue in both open and individual social media forums – those environments in which a healthy exchange of information is hallmarked with mutual respect, professionalism and equal footing.

All tenets of professionalism established by the American Academy of Dermatology and the American Academy of Dermatology Association (collectively AAD/A) for AAD/A members should be adhered to with the use of social media. In addition, social networks, blogs, and other forms of online communication create challenges to patient-physician, physician-physician and public-physician relationships. Physicians should consider a number of factors when maintaining a presence online:

- a) Physicians should adhere to all applicable standards of patient privacy and confidentiality online (including but not limited to the regulations issued under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as amended) and, for example, avoid posting online images or identifiable patient health information (unless given explicit permission by the patient to share images in this manner.) Physicians are also discouraged from providing free dermatology services in exchange for patients agreeing to have their images featured on social media. This practice would be particularly problematic for Medicare patients, as offering free services could be deemed to be an improper inducement under federal law.
- b) When using the Internet for social networking, physicians should use privacy settings to safeguard personal information and content to the extent possible. They should recognize that privacy settings are not absolute and that once on the Internet, content may be there permanently. Thus, physicians should routinely monitor their own Internet presence to ensure that the personal and professional information on their own sites and, to the extent possible, content posted about them by others, is accurate and appropriate. If content about a physician is inaccurate or inappropriate, the physician should attempt to have the content corrected or removed from the social media site.
- c) If they interact with patients on the Internet, physicians must maintain appropriate boundaries of the patient-physician relationship in accordance with professional ethical guidelines in other contexts. Further, physicians should not share personalized medical advice on social media sites, even with patients with whom they have an established physician-patient relationship. Physicians should attempt to set the terms of communication with patients online, including consideration of the intended purpose of the

exchange, response time, which modes of communication are acceptable and what do to in cases of emergency.

- d) Physicians should consider separating personal and professional content online and are generally discouraged from “friending” current or former patients. Physicians should also limit Internet searches of their patients to those searches that would provide information that would medically benefit the patient and, ideally, are authorized by the patient. If posting online in a professional context, physicians should clearly identify their credentials and any relevant conflicts of interest.
- e) When physicians see content posted by colleagues that appears unprofessional, they are encouraged to bring that content to the attention of the individual, so that the colleague can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the physician should report the matter to appropriate authorities or to the Academy’s Professionalism and Ethics Committee if the content has been posted by an Academy member.
- f) Physicians must recognize that their actions and the content that they post online may negatively affect their reputations among patients and colleagues, may have consequences for their medical careers (particularly for physicians-in-training and medical students), and can undermine public trust in the specialty of dermatology and the medical profession in general. For example, physicians should avoid venting frustration about patients via online forums as this may be viewed as unprofessional and be accessible to the targeted patients.
- g) Physicians should recommend only peer-reviewed, reliable on-line sources of medical information for patients.
- h) Physicians are discouraged from engaging in closed- or open-group meetings, forums or platforms in which personal attacks, unprofessionalism and bullying are prevalent and tolerated. These forums do not lend themselves to a meaningful and respectful exchange of views, are destructive to the specialty, and can be unfair and disrespectful to individuals targeted.
- i) Physicians should disclose all financial or other material relationships they have with regard to the maker or provider of products and services they review or discuss in online communities. This includes discussions and reviews of products and services provided to the physician for free.

This Position Statement is adapted from the AMA Code of Medical Ethics’ Opinions on Observing Professional Boundaries and Meeting Professional Responsibilities Opinion 9.124 - Professionalism in the Use of Social Media. AMA Journal of Ethics. May 2015, Volume 17, Number 5: 432-434.

Other Resources:

Ethical Issues of Social Media Usage in Healthcare. Yearbook Med Inform. 2015; 10(1): 137–147. Published online 2015 Aug 13. doi: 10.15265/IY-2015-001

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Farnan JM, Snyder Sulmasy L, Worster BK, et al. Online medical professionalism: patient and public relationships: policy statement from the American College of Physicians and the Federation of State Medical Boards. *Ann Intern Med.* 2013;158:620-627.

Code of Ethics of the American Society of Plastic Surgeons, Updated 11/25/2017.

Code of Medical Ethics for Dermatologists.

<https://www.aad.org/Forms/Policies/Uploads/AR/AR%20Code%20of%20Medical%20Ethics%20for%20Dermatologists.pdf>

[http://www.ama-assn.org/ama/pub/physician-resources/medicalethics.](http://www.ama-assn.org/ama/pub/physician-resources/medicalethics)

page (<http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics.page>)

WMA international code of medical ethics:

http://www.wma.net/en/30publications/30ethicsmanual/pdf/ethics_manual_en.pdf

A Guide to Social Media for the Physician Practice

[http://www.massmed.org/Physicians/Practice-Management/Practice-Ownership-and-Operations/A-Guide-to-Social-Media-for-the-Physician-Practice-\(pdf\)/](http://www.massmed.org/Physicians/Practice-Management/Practice-Ownership-and-Operations/A-Guide-to-Social-Media-for-the-Physician-Practice-(pdf)/)

This Position Statement is provided for educational and informational purposes only. It is intended to offer physicians guiding principles and policies regarding the practice of dermatology. This Position Statement is not intended to establish a legal or medical standard of care. Physicians should use their personal and professional judgment in interpreting these guidelines and applying them to the particular circumstances of their individual practice arrangements.