



Introduction

Doctors and medical students use social media for sharing ideas and information, campaigning, debating health issues and, like everyone else, for fun, to keep up with current events and more. Because using social media has the potential to blur the boundaries between the professional and the personal, it is possible for ethical tensions to arise, and if it is used unwisely there can be risks, but these can often be avoided through common sense and by following GMC guidance.

Below we highlight a few things to think about to help you maintain a positive social media presence, whether you are a doctor or a medical student. If you are new to social media, refer to our 'Social media – practical guidance and best practice guide' to help you get started.

You are still a doctor or medical student on social media

What you say and post online is ultimately down to your own personal judgement. If you use social media to post about medical issues or blog about your day-to-day experiences, then ethical and professional standards will more clearly apply to what you share, compared with posting about your personal life or interests outside medicine.

However, you are still a doctor or medical student on social media, even if you don't identify yourself as such or post about medical matters. The ethical and legal standards expected of you by the GMC and the broader, less well-defined professional expectations of your peers can still apply online as in any other part of everyday life. Respect patients and colleagues and take a cautious approach to anything that you think could affect your professional standing.

The GMC has guidance for doctors and for medical students on social media. The RCGP has also published a 'Social media highway code', which covers health professionals' use of social media in more detail. The BMA medical student toolkit discusses professional values and how these relate to social media and when you are 'off-duty'.

You should also check if there is a social media policy where you work or are on placement.

British Medical Association 3

Protect patient confidentiality

You have the same legal and ethical duties of patient confidentiality on social media as anywhere else. If you blog or even just share stories or anecdotes about your day-to-day clinical experiences or student placements, think carefully about the information you include and whether you will need to get consent from patients.

Be particularly vigilant when discussing anything relating to individuals or specific medical cases. Even after you have removed or heavily anonymised information that would directly identify patients, it may still be possible for a patient or their families to identify themselves from the individual bits of information that remain.

Read and follow the guidance on consent and disclosure of information from the GMC.

Follow GMC guidance before taking and sharing pictures of patients or where you work

If you want to take or share images of patients or ones that are related to a specific case and publish them online, you will need to get patient consent and follow GMC guidance. Even if you are just taking pictures of your workplace, be careful not to inadvertently capture anything or anyone that could breach confidentiality.

Maintain professional boundaries

It is possible that using social media can blur personal and professional boundaries, but it is important to try to maintain a professional distance between you and your patients. For example, if you use Facebook as a personal space online, in general, it may not be wise to accept friendship requests from patients. There may be times though when you will need to use your judgement. Doctors working in small communities are likely to have friends who are patients or former patients, so it may not be possible or desirable to maintain boundaries online in this way.

There may be other situations in which you may interact with a patient online. This is not problematic in itself but in general there should be an overriding presumption against online interactions with people who you only know from a doctor-patient context.

Think before you share

The informality and real-time nature of social media are two of its strengths but they are also potential pitfalls. Medicine can be a challenging and stressful job and while it may be tempting to let off steam or 'speak your mind', your Twitter account may not always be the best place to do it. A good rule of thumb is don't post when angry, drunk or emotional and don't say or reveal anything on social media that you wouldn't be happy to see printed in a newspaper.

You have rights to free speech but they are not absolute. Remember that defamation law applies online — avoid adverse comments about individuals or organisations, which could be perceived to be gratuitous or unsubstantiated.

Think about whether you want to post anonymously as a doctor or identify yourself

The GMC states that if you identify yourself as a doctor online it is best practice, but not mandatory, to also give your name. For the GMC, identifying yourself as a doctor when discussing health and healthcare issues (as opposed to other topics) gives weight and credibility to your views. They may also be taken to represent those of the profession more widely. Ultimately though, it is a matter for your own judgement.

The GMC's own explanation as to why it introduced this advice is worth reading. It was published in response to concerns raised by doctors and emphasised that a decision not to identify yourself is not itself a fitness to practise issue, but it could be considered alongside other more serious factors, such as bullying, breaches of confidentiality or breaking the law.

Be cautious in giving medical advice on social media

Doctors and medical students can have a powerful voice in healthcare debates and you can use your expertise and experience in providing authoritative information to the public. Signposting sources of information or answering general questions of fact is unlikely to be problematic. However, there would be significant risks in providing personalised health advice via social media to members of the public, and this should be avoided. The GMC is also clear that you should not use publicly accessible social media to discuss your patient's health with them or anyone else.

Be open about any conflicts of interest

If you are posting as a doctor, your posts are likely to be taken on trust. Be honest and avoid, or be open, about any conflicts of interest. The **GMC** has guidance on conflicts of interest which you should read and follow. You might also want to consider using sites that allow you to voluntarily declare your interests.

Manage your privacy settings and content

It's up to you how secure or private you want to make your online profiles but, whatever settings you choose, privacy can never be guaranteed and there is always the risk that what you post could be shared wider than you intended. Even ostensibly private spaces on social media — such as direct messages on Twitter, for example, can be screen-captured and shared out of context. The internet is often forgetful but it can also have a long memory. It is worthwhile reviewing your social content to ensure you are still happy for it to be accessible.



Further reading

British Medical Association (2013) *Medical students ethics tool kit.*

bma.org.uk/advice/employment/ethics/medical-students-ethics-toolkit

General Medical Council (2011) Making and using visual and audio recordings of patients. http://www.gmc-uk.org/guidance/ethical_guidance/making_audiovisual.asp

General Medical Council (2013) Doctors' use of social media.

http://www.gmc-uk.org/guidance/ethical_guidance/21186.asp

General Medical Council (2013) Financial and commercial arrangements and conflicts of interest. http://www.gmc-uk.org/guidance/ethical_guidance/21161.asp

General Medical Council (2016) *Professional* behaviour and fitness to practise: guidance for medical schools and their students. http://www.gmc-uk.org/education/undergraduate/professional_behaviour.asp

General Medical Council (2017) Confidentiality: good practice in handling patient information – In effect from April 2017. http://www.gmc-uk.org/Confidentiality2017. pdf_69037815.pdf

Royal College of General Practitioners (2013) Social media highway code. http://www.rcgp.org.uk/social-media



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