Social Media Guide
How to connect with patients and spread women’s health messages
The phrase “social media” gets thrown around a lot these days. The new lingo that comes with it—and the myriad of platforms—can be intimidating and confusing. But social media can be so much more than teenagers tweeting or families sharing photos of grandchildren. For physicians, social media can be an effective tool to disseminate critical health messages to your patients and the general public.

In this issue of ACOG Today, you’ll find tips and ideas for those considering jumping into social media professionally, as well as ways more experienced users can enhance their efforts. You’ll read how other ob-gyns are effectively using social media and how ACOG is using social media to reach out to its members and the public. We also address professional liability issues and suggest ways you can protect yourself.

Even if you aren’t using social media, your residents and staff likely are, so it helps to familiarize yourself with these tools. You may even want to consider creating a social media policy for your office staff, so everyone knows what is allowed—before a question arises.

The super-sonic speed in which technology is advancing during the 21st century is a marvel. It seems like just a few years ago when email became a part of everyday life, and now we are all interacting at an incredible pace on our smartphones, laptops, and tablets. Whether you are embracing new technology wholeheartedly or dipping your toe in the pool, please take a few moments to learn how social media can enhance your practice and improve women’s health.

When I was a practicing ob-gyn in North Carolina seeing patients every day, listening to their life concerns was very important. I tried to offer reassurance and important health messages, along with medical advice and treatment. Often, I wouldn’t interact with these patients again until their next well-woman visit.

But with the creation and proliferation of social media, ob-gyns now have the opportunity to continue to provide important women’s health messages to their patients throughout the year. In fact, because of the infinite range of social media, ob-gyns can educate women 24/7. But with this opportunity to educate comes an online responsibility to respect patient privacy, to not offer medical advice, and to always maintain your professionalism.

Whether you’re a social media neophyte or a guru, you should set a few ground rules for yourself and always consider exactly what you’re saying before you post, blog, tweet, or upload.

As you explore how social media can enhance your practice, I also encourage you to get involved in ACOG’s social media efforts (see page 3). Together, we can educate millions of women about leading healthy lives.
Connect with ACOG through social media

ACOG’s social media presence has gained a tremendous following in the past year. Whether it’s on Facebook, Twitter, YouTube, or the President’s Blog, ACOG is reaching out to members and the public through a variety of platforms.

The number of followers continues to climb every day, reaching thousands of ACOG members, other clinicians, government agencies, women, reporters and bloggers, and national organizations and advocates.

facebook.com/acognational

- Go to ACOG’s national Facebook page and click “like.” You’ll be notified about College documents, the latest women’s health news, and helpful resources for you and your patients.
- Access your ACOG district’s Facebook page by clicking on the “ACOG Districts” map on the national page. “Like” your district page to get district-specific posts and regional news.
- If your office has a professional Facebook page, click “share” on any ACOG post to share that resource or health message with your patients.

twitter.com/acognews

- You don’t need a Twitter account to visit ACOG’s Twitter page. But if you have a Twitter account, “follow” ACOG to receive our daily tweets in your feed.
- Join ACOG for our regular Twitter chats, in which ACOG Fellows answer the public’s questions and provide resources on a specific women’s health topic. Previous topics have included STDs, HPV vaccination, nutrition during pregnancy, breastfeeding, and adolescent health. Follow hashtag #acogchat. (We announce the topic, day, and time of chats on Facebook and Twitter.)

acogpresident.org

- Read weekly blog posts from ACOG’s president on a variety of topics, such as reproductive rights, pregnancy issues, gynecologic concerns, healthy living, and more.
- Subscribe to the blog to receive an email when a new blog post is up. You’ll see the “sign up” button on the right side of the blog homepage.
- Comment on blog posts to add to the conversation.
- Use the provided icons at the end of each blog post to share the post on your own social media sites.
- Become an ACOG guest blogger by submitting a 400-word draft blog post on a women’s health topic for consideration to communications@acog.org.

youtube.com/acognews

- Watch more than 60 videos of Fellows and Junior Fellows delivering women’s health messages or presenting their latest research.
- See a video you like? Embed it on your Facebook page, website, or blog post by clicking “share” and copying and pasting the embed code onto your site. Or, simply share the link.

TIP

Having trouble remembering ACOG’s social media links? Just go to our website, acog.org. All of the social media links are at the top right corner of the homepage.
Y ou’ve decided it’s time to start a professional Facebook page, create a Twitter account, or start blogging about women’s health issues. But before you dive in to social media, do your homework. Ask yourself these key questions, then establish some guidelines and goals, and learn the strategy and etiquette of the different platforms.

1. **What is my goal?**
   (To educate patients and/or the public at large, advocate for women’s health issues, increase my visibility, etc.?)

2. **Who am I trying to reach?**
   (Current patients, all women, colleagues?)

3. **How much time can I commit to this?**

4. **Does my practice or hospital have a social media policy I must abide by?**
   (Be sure to ask; don’t just assume there is no policy.)

**Each Social Media Platform is Unique.**

Get to know how each one works and discover what might be most useful to you and your patients.

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**Facebook**

You may already have your own Facebook personal page featuring photos of your kids and your trip to the Grand Canyon. However, you should create a new, separate page for yourself to use professionally. Start here—Facebook’s “Create a Page” section: facebook.com/pages/create.php.

Unlike Twitter, a Facebook page allows you to post as much copy as you want, but it’s best to limit posts to one to two sentences. Posts are more helpful and receive more visibility if they link to another website, whether it’s an important news article, journal study, or useful patient resource.
Twitter

Twitter can be intimidating until you know the lingo (see page 10). First, create a Twitter “handle” or username using some variation of your name. Make it understandable, but as short as possible, such as @MyNameMD or @ObGynofMyTown. Type in a short bio and upload a professional photo. You’re ready to tweet.

Remember, everything is public and can’t be taken back once it’s sent. Brevity is essential: You have only 140 characters per tweet, including spaces between words. You may want to stick with only 120 characters, making it easier for others to add comments and retweet. Fertility specialist Serena H. Chen, MD, FACOG, recently tweeted, “Is #aspirin ok when you are trying to conceive or during #pregnancy?” She then linked to one of her blog posts. To make sure her tweet will show up in Twitter searches, she put a “hashtag” (the symbol #) in front of certain keywords: #aspirin, #pregnancy.

You can tweet comments and links to interesting news articles or new research you think is important. Something intriguing in the latest Green Journal (@greenjrnl)? Tweet about it.

Find other doctors to follow on Twitter doctors.net; often, when you “follow” people’s tweets, they will follow you back. Many important health care organizations are on Twitter, including ACOG, the Centers for Disease Control and Prevention (with multiple Twitter accounts), the World Health Organization, and almost every major US hospital. The New York Times, The Wall Street Journal, and NPR all have health-related Twitter feeds. Google the organization’s name and “on Twitter” to find it.

You can send tweets directly from the Twitter website, twitter.com, but many people prefer to install an app directly on their phone or tablet to make tweeting more convenient. Dr. Chen (@DrSerenaHChen) and San Francisco Bay area Fellow Jennifer Gunter, MD (@DrJenGunter), both use free online tools, such as HootSuite or TweetDeck, that allow you to schedule tweets ahead of time.

“I spend just a few minutes a day sorting through online news and Twitter feeds I follow and picking out what’s interesting,” Dr. Chen said. “Then, instead of putting it all out there at once, I set it to post at intervals throughout the day so it’s easier for people to digest. I can get information out to my patients in just a couple of seconds. I have been very impressed by the quality of these little bytes of information for living a healthy life.”

Blogging

Blogging may seem more intimidating than just tweeting or posting to Facebook, but it shouldn’t be. There are several free blog hosting services available; two of the most popular are WordPress and Blogger. Maryland Fellow Mark S. Seigel, MD, uses WordPress for his, while Fellow Suzanne R. Trupin, MD, of Champaign, IL, tried both services when she launched her blog, GynoGab (gynogab.blogspot.com). “At first I double-posted on both sites,” Dr. Trupin said, “but I found that I was primarily getting comments on the Blogger site, and not on WordPress, so I took WordPress down.”

Dr. Trupin keeps an “idea book”—a Word file with drafts of blog posts and notes about what might make an interesting subject for a post. “If I have a new Green Journal, say, I’ll make a few notes on my laptop,” she said. “And then I’ll take an hour or an hour and a half on Saturday and pull something from my idea book. My goal is to have posts every day, although I don’t always make it.”

If you have a blog, you can use Facebook or Twitter to generate more interest in what you have to say. Dr. Trupin (@GynoGab) has amassed a list of more than 1,700 Twitter followers, so when she posts a new blog topic, she’ll immediately tweet about it. “I get so many more hits that way,” she said.
Some of the most important rules for physicians using social media include:

1. Don’t discuss patients online, even in general terms.
2. Don’t give medical advice.
3. Don’t post photos of patients or babies.
4. Don’t post anything you don’t want the entire world to read. Everything you do and say online is public.
5. Don’t “friend” your patients on Facebook. If you have a personal Facebook page, consider creating a separate professional one.
6. Don’t spend too much time directly promoting your practice. Social media is about having a conversation, so limit self-serving practice promotions such as “We have 4-D fetal ultrasound at our downtown location!”
7. Always maintain your professionalism.
8. Be careful with humor and political opinions.
9. Speak in lay terms patients and consumers will understand.
10. Ask your employer and/or hospital if it has social media guidelines you must follow.
11. Consider creating a social media policy for your practice.
12. Ask your professional liability carrier if it has social media coverage or guidelines.
The experience of a doctor in Rhode Island has become a cautionary tale for physicians using social media. After she discussed a trauma case on her Facebook page, the hospital revoked her privileges and the state medical board reprimanded her, according to the *Boston Globe*.

“Discussing a patient, even in general terms, in social media is like talking about a case in a hospital elevator, but with millions listening,” said Albert L. Strunk, JD, MD, ACOG deputy executive vice president and vice president of fellowship activities. “Just by knowing small details like the date or the doctor’s or hospital’s name, it’s not too difficult to discover who the patient could be.”

Social media can be an effective tool to disseminate important health messages, reach out to patients, and advocate for women’s health issues. But with this new territory comes new rules and risks. By educating yourself about potential liability pitfalls and being alert to possible privacy violations, you can have a successful and rewarding social media presence.

One of the challenges is that once you become comfortable with social media, its casual environment can feel more intimate than it is. We let down our guards, and this is when slip-ups can occur, said Stella M. Dantas, MD, chair of ACOG’s Committee on Professional Liability.

“One high risk for violating HIPAA is a situation in which you’re tired, you come home, maybe you’ve had a difficult delivery, and you post something on Facebook to your friends because you’re processing it,” Dr. Dantas said. “But unfortunately, there’s enough info about the patient that she could potentially be identified.”

In a survey of state medical boards, the majority had received reports of online professionalism violations. These included inappropriate patient communications; inappropriate medical practice, such as prescribing without an established clinical relationship; and misrepresentation of credentials. In response, 71% of boards held disciplinary proceedings, and 40% issued informal warnings, according to the survey in the March 21, 2012, issue of the *Journal of the American Medical Association* (JAMA).

Whenever you are considering posting anything that has to do with work or medicine, even on your personal social media accounts, always remember your position as a physician. “You have a professional image to maintain, so always consider the impact of what you’re posting,” Dr. Strunk said.

**Do your homework**

To help ward off any missteps, don’t dive into social media without first researching how various platforms work and developing a plan. (See page 4 to learn how to get started.)

“Make sure you understand your privacy settings; they vary among platforms,” Dr. Dantas said. “If you’re new to social media, have someone walk you through how to set up your privacy settings. It’s not that easy to navigate, and privacy policies change often.” And keep in mind that anything you post online is potentially searchable and is never truly deleted. “Your digital footprint is always there,” Dr. Dantas said.

According to a recent survey by QuantiaMD, 67% of physicians use social media professionally, an ever-growing group that can communicate directly to patients about preventive screenings, signs and symptoms of illnesses, and healthy lifestyle choices. Establishing your own social media plan and adhering to a few basic rules can keep you safe and secure as you educate your patients.
ACOG Fellows make their mark in social media

The doctor will tweet you now

Three years ago, Maryland Fellow Mark S. Seigel, MD, had the kind of online presence many physicians still have: a static website. It described the practice’s services, listed office locations and business hours, and highlighted Dr. Seigel’s biography and awards. He’d designed it himself and spent minimal time keeping it updated.

Then, at the 2010 ACOG Annual Clinical Meeting, Dr. Seigel—who also has a degree in computer science—was a presenter for a session on health care information technology. The course focused on electronic health records, but it soon became clear that the growing role of social media in medical practice needed to be incorporated.

To prepare for the revised course, Dr. Seigel decided to jump-start his own social media presence. He launched a blog and made it the main page of his website, markseigel.com. He also set up a Facebook Page, opened a Twitter account, @RockvilleObGyn, and placed social media icons on his website to encourage users to “follow” him. In doing so, he joined a growing population of ob-gyns—and doctors in general—who are promoting their practices, educating their patients, and reaching out to a broader community through social media.

According to a survey of 4,000 physicians conducted by QuantiaMD in 2011, 67% of physicians use social media professionally, and 87% use it personally. Doctors are using online physician communities, like QuantiaMD and Sermo, the most, at 28%, allowing them to connect exclusively with other physicians and keep up on the latest research and recommendations in their specialty. About 15% use Facebook professionally—though 61% are using Facebook personally. Also used professionally by physicians: 8%, blogs; 8%, YouTube; and 3%, Twitter. Another 17% use LinkedIn, the professional networking site.

That leaves 33% of physicians who don’t use social media professionally at all.

Why social media?

Why should doctors use social media? What can it do for you? And how can you make the most of it without falling prey to hazards like privacy violations?

Establishing a social media presence is not going to suddenly cause hundreds of patients to beat down your door, according to ob-gyns like Dr. Seigel, but it can be a very effective way to communicate with and educate current patients.

“My approach is to write blog posts about things I’ve just discussed in the office,” Dr. Seigel said. “For example, I recently wrote about Essure, the new method of permanent birth control. I included an image of the inside of the uterus, where the tubal ostium is and where the implant is inserted. It’s something a patient can look over at her leisure and get a better idea of something we might have discussed briefly during a visit.”

Other topics Dr. Seigel has blogged about include the warning signs of preeclampsia, cervical cancer and HPV, and new prenatal
genetic tests. He often uses ACOG materials as sources for his posts. “I used to give out pamphlets and information sheets, but with those, you print out 50 and they sit on a shelf and they don’t change,” he said. “With a blog, you can write about a new topic in 20 minutes, publish it, and it’s there for your patients to read at any time.”

Dr. Seigel waited until his blog was established to launch his professional Facebook page and Twitter account to help push traffic to his blog. When he posts a new blog entry, he’ll announce it on Facebook and Twitter. “They reinforce each other,” he said.

Dr. Seigel’s blog is his alone, but Fellow Serena H. Chen, MD, blogs on a practice-wide website, sbivf.com/blog, hosted by the Institute for Reproductive Medicine at St. Barnabas Medical Center in Livingston, NJ, where she is director of the Division of Reproductive Endocrinology.

Dr. Chen and her colleagues inherited the web presence from the previous division director, Fellow David B. Sable, MD, who had launched a message board for patients in the 1990s, a board that remains active. All doctors in the practice respond to questions on the message board, but Dr. Chen is the most frequent blogger. She’s blogged on topics such as antidepressants and pregnancy; alcohol and IVF; fertility; and breast cancer. She also guest blogs on other websites, such as FertilityAuthority.com, and tweets at @DrSerenaHChen.

“While I hope it brings more patients in the door, I think our social media presence is primarily an educational tool for our patients. They get information from a lot of different sources these days, and they need to hear their doctor’s voice not just in the office, but in other forums as well,” Dr. Chen said. “Every time we answer a question or create a blog post about something like bleeding during pregnancy, we try to include a bit of public health education.”

Michigan Fellow Suzanne Hall, MD, launched her blog, GynoGroupie.com, in February 2012 for many of the same reasons. “I first wanted to be able to provide a resource for our practice’s patients. Often, I think patients leave their appointments without a full understanding of what we’re trying to discuss with them,” she said. “Then I started seeing that it could also be an opportunity for any reader who was interested in women’s health issues.”

Dr. Hall said she spends about six hours a week managing her professional Facebook page (Facebook.com/find.drsuzyyhall) and Twitter account (@druzyyhall), marketing and updating the blog, and collaborating with others interested in social media in health care. Recent blog posts include a briefing on what a routine annual gynecological exam should include and a link to a video of uterine fibroids.

When the whole world can read what you’re writing, you have to be particularly judicious about what you say. There are important caveats about privacy and discretion for anyone who participates in social media, but the bar of caution is set even higher for physicians.

A few things to keep in mind:

1. **Don’t give medical advice online.** Someone may contact you with medical questions via your Facebook account, Twitter feed, or blog. “If they’re not your patient and they’re not sitting in front of you, you can’t give medical advice,” Dr. Chen warned.

   Many doctors’ blogs and other social media sites contain disclaimers stating that their posts are for educational purposes only. “I did a lot of research and reading based on information from health care attorneys who are experts in social media and HIPAA and tried to follow their guidelines,” Dr. Hall said. She cites health care lawyer David Harlow and his HealthBlawg site as one favorite source. “Whenever I get personal medical questions, I’ll redirect the person and ask them to call the office directly.”

2. **Don’t post or tweet anything to do with your day at the office.** Suggested Fellow Jennifer Gunter, MD (drjengunter.wordpress.com), an ob-gyn and pain medicine physician in the San Francisco Bay area. “I might say that I worked out at lunch, but I would never post or tweet that I was running late or even that a patient asked me xyz question today,” she said. “Even an innocent comment can be misinterpreted. Say you post that you just did a difficult hysterectomy; what if that patient later has a complication and sues, and her lawyer pulls your Twitter feed and suggests that the surgery was over your head?” (Learn more about liability risk on page 7.)

3. **Never post or tweet anything about a patient.** In 2011, a physician in Rhode Island had her hospital privileges revoked and was reprimanded by the state medical board after she posted comments to her Facebook page that included information about a trauma patient. She didn’t identify the person by name, but there was enough detail that officials said people in the community would be able to figure out who the patient was.

   “If I post that I saw an interesting case involving pelvic pain today, and I saw 15 patients that day, a patient reading my blog or Facebook page knows there’s a 1 in 15 chance I’m talking about her,” Dr. Gunter said. “That’s not fair even if it is sanitized for HIPAA. Instead, if I see an interesting case, I might turn an idea related to that condition into a blog post later, but I will never relate it to a specific patient.”

   If you keep these few caveats in mind, social media can be a great forum for you to communicate with your patients, their community, and the world at-large.

   “Just write about things you’re already interested in, things you wish your patients knew, and keep it up-to-date,” Dr. Seigel said. “Take 20 minutes a couple of times a week to write an article or two and put up Facebook posts or tweets about it. Anyone can do it, and it doesn’t have to take a ton of time.”
Social media definitions

**Blog**: a website of regularly updated journal-type entries, often focusing on a specific theme, displayed in reverse chronological order. A blog is often, but not always, maintained and written by one person. “Blog” was shortened from “web log.”

**Facebook**: the largest social network in the world, used for both personal and professional use. Ob-gyns can set up a public, professional page and post “status” updates linking to health resources, women’s health recommendations, or reputable news articles or journal studies. Ask your patients to “like” your office page and they will receive your updates on their Facebook homepage.

**Flickr**: a photo management and sharing website.

**Hashtag**: a word preceded by the # symbol on Twitter that marks keywords in a tweet. Search hashtags, such as #HPV, in the Twitter search bar to find tweets on that topic.

**LinkedIn**: a professional social networking site primarily used for business networking.

**Microblog**: a blog-type site that allows users to post mini-updates. Twitter is the most popular microblog.

**Post**: used both as a verb and noun referring to updates you put on Facebook, as in “I posted a new post today.”

**Tweet/tweeting**: A “tweet” is the 140-character message sent out via Twitter. “Tweeting” is the act of using Twitter.

**Twitter**: a microblogging site that allows users to send short, real-time 140-character updates, known as “tweets,” to the general public. People “follow” you to receive your tweets in their Twitter feed; you can “follow” others that you want to see tweets from.

**Twitter chat or tweet chat**: a Q&A on Twitter hosted by a person or a group that allows anyone to follow it in live time, asking questions and discussing issues on a particular topic. You find a chat by searching Twitter for a designated hashtag—such as #acogchat—at a predetermined day and time.

**Twitter handle**: your username on Twitter, shown with an @ symbol, eg, @acognews.

**YouTube**: a site used to share original (not copyrighted) videos.

**Widget**: a small, portable application that you can place on your website or blog to display specific content. For example, you can put a free BMI calculator from the Centers for Disease Control and Prevention on your website, instead of simply linking to it.

**Wiki**: any collaborative website that allows users to edit the content. Wikipedia, the free encyclopedia site, is the best known.

Resources to get you started

“Professionalism in the Use of Social Media,” American Medical Association policy: ama-assn.org/ama/pub/meeting/professionalism-social-media.shtml


Better Health, a network of professional health care bloggers: getbetterhealth.com

tweetreach.com and hashtracking.com: tells you how many people your tweet reached

TIP

Read the online version of this issue of ACOG Today to click directly on all the links provided: acog.org/goto/acogtoday.

How to create YouTube videos for patient education: kevinmd.com/blog/2012/09/create-youtube-videos-patient-education.html

How to set up a Facebook account: Visit facebook.com and click “help” in the bottom right corner.

How to set up a Twitter account: support.twitter.com/articles/100990-how-to-sign-up-on-twitter
How to use apps in your ob-gyn practice

Within the last year, the entire medical staff at the Institute for Reproductive Medicine at St. Barnabas Medical Center in Livingston, NJ, has converted to using tablets and smartphones. “We’re doing sonograms every day of the week and running from room to room with our patients, so we use iPads as a kind of portable chart,” said Fellow Serena H. Chen, MD. “You can tap on the tablet and the patient’s chart is right there—all her drugs, her medications, and her most recent sonogram. Even if you’re just covering, you can pull up her information really quickly.”

Dr. Chen and her colleagues aren’t alone. Physician use of tablets and related mobile devices doubled between 2011 and 2012, according to a survey released in May by Manhattan Research, a global pharmaceutical and health care market research firm. The survey found that 62% of doctors are now using tablets, compared with 35% in 2011. About half of those tablets are used at the point of care.

Fellow Tamara Helfer, MD, who practices at the Christie Clinic in Champaign, IL, uses a tablet that’s more like a laptop computer. “I love it,” she said. “Going from room to room, I have templates and can do all of my work in the room and right outside, so all of my charting and related work can be done before I leave the office.” Her practice is now pilot-testing a new Mac-based charting system that would allow physicians to switch to iPads.

In addition to accessing patient charts and electronic medical records, ob-gyns and other physicians are using tablet- and smartphone-based apps to keep information at their fingertips and recommending useful health care apps to their patients.

**Apps for ob-gyns**

- **ACOG apps:** ACOG is working on several different types of apps to keep members informed about recommendations and to educate their patients. Stay tuned for details.
- **ICD-9 coding apps:** ICD9 Codes by SVMSoft and Stat ICD-9 Lite are two of several coding apps available. “There are millions of codes out there and this makes it much easier to bring them up,” Tamara Helfer, MD, said.
- **MediMath:** an aggregator of 144 of the most important medical calculators and scoring tools, including OB calculators, IV dosages, and body mass calculators.
- **The Merck Manual-Professional Edition:** a digital version of Merck’s reference text. The manual, and other premium medical resources, are also available aggregated within SkyScape.
- **Epocrates:** a mobile drug, diagnostic, and disease information utility.
- **WebMD’s Medscape:** a popular source of professionally focused medical news and journal articles.
- **Bishop’s Score Calculator and Perfect OB Wheel.**
- **Mavro’s Medical Spanish.**
- **Catch:** a note-taking app. “If I find an article I really like, I can cut and paste what I need and then make my own notes,” Dr. Helfer said.
- **Dragon Dictation:** a voice-recognition app that allows you to speak and instantly see your texts and emails.

**Apps for patients**

- **iContraction:** Instead of writing down when a contraction starts and ends, a woman in labor can just tap the app when a contraction begins and again when it ends. There’s a log that she can email or bring to your office.
- **iPeriod:** a period tracker.
- **iPill and myPill:** birth control reminder apps.
- **dLife and Glucose Buddy:** help people with diabetes track their blood sugar and other key measures.
- **iTriage:** a symptom checker that guides patients through their symptoms and helps them find the right health care provider nearby.
- **Healthy weight apps:** Many ob-gyns told ACOG Today that they frequently recommend apps to help patients manage their weight—a critical element of their practice. “I’m always giving information to my patients about eating right and staying at a healthy weight,” Tamara Helfer, MD, said. She recommends Livestrong’s healthy lifestyle apps to her patients, especially the mobile calorie counter. Jennifer Gunter, MD, likes the food and exercise journal app Lose It!, using the app herself to lose 50 pounds recently. Fertility specialist Serena H. Chen, MD, endorses Lose It! as well: “Obesity is a key cause of infertility, and having a super-easy way to write down everything that goes into your mouth each day is eye-opening.” Studies have shown that food journals can be effective for weight loss, but which are patients more likely to carry everywhere they go: a journal or their smartphone?
15 tips to get the most out of social media

Have you been trying out social media for a while and want to step up your game? Try these tips.

1. Recognize that each social media platform is different. Learn the lingo, and phrase posts differently for each vehicle.

2. Be thoughtful and concise. This increases your chance for retweets and Facebook shares, which grows your audience.

3. Write 1–2 short sentences to introduce a Facebook link. Add a local angle, offer your analysis, or provide guidelines or a health message.

4. When you add a link to a Facebook post, for easier reading clean up the headline and text that is automatically embedded: Click on the headline to retype it, making it shorter or replacing a long website address with a pithy headline. Click on the embedded copy to shorten it to 2–3 lines or it will be automatically cut off. Better yet, copy and paste a more relevant sentence from the article you’re linking to.

5. Don’t allow your Facebook or YouTube posts and uploads to be automatically tweeted or posted to other platforms. You want your tweets and posts to sound human, not automated.

6. Hyperlink phrases in your blog to relevant pages on other websites.

7. Allow comments to your blog posts to encourage conversation. Most blog platforms allow you to approve comments first, if you prefer.

8. Add to your blog an ongoing list of links to other blogs you like. Contact those bloggers and ask them to add your blog to their list.

9. Embed widgets, photos, and YouTube videos to your website or Facebook page. But be aware of copyright and privacy laws. (Free CDC widgets: cdc.gov/widgets)

10. Interact with others on Twitter to gain new followers and get more views of your tweets. Follow, retweet, and reply to tweets from ACOG, your hospital, other physicians, and national organizations. Go to ACOG’s Twitter page to see our list of followers and which organizations, other ob-gyns, and government agencies you may want to follow.

11. Recognize that you don’t have to respond to every tweet directed at you or mentioning you. Some people with specific agendas “heckle” others in tweets or try to bait people into an argument. Your tweets are always public, and not responding may sometimes be the most responsible and professional choice.

12. Embed your Twitter feed onto your practice website and/or blog, so website visitors can see your most recent tweets in real time.

13. Limit your tweets to 120 characters, instead of the 140 allowed, to make it easier for others to retweet your messages.

14. Use shortened URLs, or website links, on Twitter to save space. Well-known URL shorteners: bitly.com, ow.ly, and tinyurl.com.

15. Use websites like HootSuite, CoTweet, or TweetDeck to manage all your social media channels in one place. These sites allow you to schedule posts and tweets ahead of time and keep track of who is following you and interacting with your posts.
In Memoriam

Mervan Oswald Anderson, MD
Virginia Beach, VA
6/12

Mark G. Coley, MD
Mobile, AL
2/12

Howard Gass, MD
Franksville, WI
7/12

William T. Griffin, MD
Columbia, MO
8/12

Elwyn Mancel Grimes, MD
Fort Worth, TX
8/12

M. Wayne Heine, MD
Tucson, AZ
7/12

Hilton A. Salhanick, MD
Brookline, MA
6/12

Sidney L. Sellers, MD
Dalton, GA
12/11

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8/12
67% of physicians use social media professionally.

55% of Twitter users are women.

53% of the US population is on Facebook.

80% of adult Internet users in the US look for health info online.

42% of US adults have cell phones with apps on them.

Statistics courtesy of Twitter, SocialBakers.com, Pew Research Center, and QuantiaMD.