DGIM Project Summary

**Name of Project:** Use of Social Media in Healthcare

**Investigator(s). (Include phone numbers and email address, indicate PI and primary contact)**

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**Research question(s):**

This survey aims to sample a random population of patients at multiple primary care sites across the United States to understand two primary themes:

1) Patient attitudes towards use of social media for obtaining health-related information
2) Patient attitudes towards provider privacy and professionalism on social media

**Brief Background/Significance:**

Social media, through its power to build community, amplify, disseminate, and engage, has transformed the way we communicate as a society. Social media use has grown exponentially amongst individuals, with 73% of online individuals now using some type of social networking site, and 42% of online adults using multiple social networking sites [1]. Almost 87% of adults use the internet, as of Pew Research data collected in January 2014 [2]. Even usage amongst older adults is high, with 88% of adults aged 50-64 using the internet [2].

This growth in both internet and social media use has tremendous ramifications for the practice of medicine. For one, physicians can now communicate with the public in new ways: through blogs, on social networking sites like Facebook or Twitter; they can communicate with patients through secure patient portals that allow for instant messaging, video chats, and online scheduling. Given the high rates of internet and social media usage, it is no surprise that more individuals are turning to the internet and social media for health information. Anecdotally, the medical community is aware of individuals and patients turning to social media for health information. However, there is little understanding of how patients view social media sites and what norms for behavior should exist on these sites by both patients and providers. Thus, this study aims to better understand patient attitudes towards the use of social media for obtaining and disseminating health-related information by both themselves and their providers.


**Inclusion/exclusion criteria (list)**
Inclusion criteria: English speaking, receiving care at the DGIM practice, age >18
Exclusion criteria: Non-English speaking

**Method of contact/recruitment (be specific)**
A research team member (either the PI or student) will inform patients of the study, consent them for participation, and administer the survey, which will take 5-10 minutes. There is no additional follow up or participation needed on the part of the patient. No chart review is needed for recruitment, or at any point in the study.

**Benefits/burden for participants (clearly identify potential for harm)**
Patients at any time have the option to decline to participate in the study. The entire participation and patient involvement is minimal, on the order of 15-0 minutes, and so we expect little harm to patient welfare.

There are no greater than usual physical, emotional, social, legal, or economic risks for participants in the study. The survey does not ask for any identifying information. It does not ask any sensitive questions that would cause discomfort or put respondents at risk. The respondents are merely being surveyed to assess their use and attitudes on social media and simple demographic information.

**Any benefits or burden to DGIM practitioners?**
Potential benefits to practitioners include better understanding the needs of patients in regards to the use of social media, once results are published.

The survey will be administered in the waiting room and requires no participation on the part of DGIM practitioners. The survey itself is brief and will in no way negatively impact practitioners. If a patient is called while they are completing the survey, they will be asked to go to their appointment, with the option of completing the survey after their visit.

**Timeline for recruitment (projected start and stop dates)**
Our goal is to recruit about 100 patients – we anticipate being able to do so in about 1-2 weeks. We are happy to work with the clinic and determine a 1-2 week period this summer/fall to recruit patients, though our goal is to recruit patients in July, August, or September.

**Funding source:** None. We don’t anticipate any funding needs.

**Potential for DGIM collaborators? (We encourage DGIM resident and fellow involvement in particular)**
A 4th-year UCSF medical student is serving as an RA. There is potential to expand the survey to be provider facing and I would be happy to work with a resident or fellow on this work if there is interest.

**Do you agree to notify us when recruitment is completed?: Yes.**

**Date form completed:** 6/25/2014