



Federation of State Medical Boards Adopts Model Policy Guidelines for Use of Social Media in Medical Practice

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The Federation of State and Medical Boards (FSMB) has recently adopted [Model Policy Guidelines for Appropriate Use of Social Media and Social Networking in](#)

[Medical Practice](#). This article summarizes the FSMB model guidelines and suggests other important provisions for comprehensive Social Media Model Guidelines.

1. Evidence of Growing Need for Social Media Policies for Medical Practices

The FSMB says that there are growing concerns about physician use of social media that are the basis for the need for social media policies. The FSMB points to many hospitals and care organizations such as the [American Medical Association](#), [American College of Physicians](#), [Cleveland Clinic](#) and [Mayo Clinic](#) that have developed social media policies.

In its findings, the FSMB reported that 67 percent of 4,000 physicians surveyed used social media for professional purposes, that 35 percent of practicing physicians have received friend requests from a patient or member of their family, and that 16 percent of practicing physicians have visited an online profile of a patient or patient’s family member. In addition, the FSMB reports that medical schools and their students often use online social networking websites and students have been disciplined for posting unprofessional content online. Further, FSMB reports most physician licensing authorities in the United States have reported incidents of physicians engaging in online professionalism violations, many of which resulted in serious disciplinary actions. In a 2010 survey of executive directors of State medical boards in the United States, the FSMB reported that 92 percent indicated that violations of online professionalism were reported, and that 69 percent of the violations included internet use for inappropriate contact with patients, 63 percent with inappropriate prescribing and 60 percent with misrepresentation of credentials or clinical outcomes. In response to these violations, the FSMB reported, 71 percent of boards held formal disciplinary proceedings and 40 percent issued formal warnings. Outcomes for the disciplinary proceedings, the FSMB reported, included serious actions such as 44 percent license limitations, 29 percent suspension or 21 percent revocation of licensure.

2. Usual Professional and Ethical Standards Apply Online

In its report, the FSMB emphasized that there should be imperative ethical and professional standards applied to all aspects of a physician’s practice, including online interactions with social media and social networking sites. Referencing the FSMB House of Delegates “Model Guidelines for the Appropriate Use of Internet and Medical Practice” adopted in 2002, physicians using social media and social networking sites are expected to observe the following ethical standards:

- **Candor** – Physicians have an obligation to disclose clearly any information (e.g. financial, professional or personal) that could influence patients’ understanding or use of information, products or services offered on any website offering healthcare services or information.
- **Privacy** – Physicians have an obligation to prevent unauthorized access to, or use of, patient and personal data and to ensure that “the identified” data cannot be linked back to the user or patient.
- **Integrity** – Information contained on websites should be truthful and not misleading or deceptive. It should be accurate and concise,

up-to-date, and easy for patients to understand. Physicians using medical websites should strive to ensure that information provided is, whenever possible, supported by current medical peer-reviewed literature, emanates from a recognized body of scientific and clinical knowledge and conforms to minimal standards of care. It should clearly indicate whether it is based upon scientific studies, expert consensus, professional experience or personal opinion.

3. Guidelines for Appropriate use of Social Media and Social Networking in Medical Practice

The FSMB recommends the following guidelines for physicians who use social media and social networking in their personal and professional lives:

- **Interacting with Patients** – Physicians are discouraged from interacting with current or past patients on personal social networking sites such as Facebook. Physicians should only have online interaction with patients when discussing the patient’s medical treatment within the physician-patient relationship. These interactions should never occur on personal social networking or social media websites.
- **Discussion of Medicine Online** – Social networking sites may be useful places for physicians to engage in peer-to-peer sharing with other physicians of experiences and education, as well as to discuss areas of medicine and particular treatments. These websites, however, should be password-protected so that non-physicians do not gain access and view discussions implying medical advice. Physicians should also confirm that any medical information from an online discussion that they plan to incorporate into their medical practice and is corroborated and supported by current medical research.
- **Privacy/Confidentiality** – Patient privacy and confidentiality must be protected at all times, especially on social media and social networking sites. Any breaches in patient confidentiality could be harmful to the patient and in violation of federal privacy laws such as the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and applicable state privacy laws. Physicians should never provide any information that could be used to identify patients. For example, physicians should never mention patients’ room number, refer to them by code name, or post their picture.
- **Disclosure** – At times in peer-to-peer physician sites, physicians may be asked or may choose to write online about their experience as a healthcare professional, or they may post comments on a website as a physician. When doing so a physician must reveal any existing conflicts of interest and they should be honest about their credentials as a physician.
- **Posting Content** – When posting content online, the FSMB recommends that physicians always remember that they are representing the medical community and should always act professionally and take caution not to post information that is ambiguous or that could be construed as taken out of context. When moderating any website, the FSMB recommends that physicians should delete inaccurate information.

4. More Suggestions For Social Media Policies

In addition to the suggested content by the FSMB, the authors suggest the following points be included in social media policies for a medical practice:

- In patient or public sites or blogs, when describing their medical experience:
 - Physicians should disclose any conflicts that a patient would consider necessary such as ownership interest in a hospital named or ownership of shares or financial benefits received from a manufacturer or a device or drug described. This disclosure may be required by the Federal Trade Commission [Endorsement Guides](#).
 - Physicians should disclose that they are not advising about a specific procedure for a specific patient, since they have not examined the individual/patient and may not be licensed to practice medicine in the state where the individual resides. State

law regulates the creation of a patient/physician relationship and defines the amount of interaction and type of examination necessary to provide medical advice or prescribe a particular treatment for an individual.

- Physicians should not use or display images, company names, brand names, seals or logos of companies or organizations that might falsely imply endorsement, sponsorship or affiliation.
- In addition, physicians should comply with the state deceptive trade practices act and all medical board advertising guidelines.

A social media policy for a medical practice should also address **HIPAA** and state privacy law requirements regarding the disclosure of patient information and should consider the following:

- Physicians should not post photographs of patients online or on any social media website or practice website without the express permission of the patient in writing.
- Physicians should not post any patient identifying information online if discussing a particular case in a physician discussion or professional site (only use fully de-identified data).
- Physicians should comply with **HIPAA** and applicable state law in the event of a breach of patient's protected health information which may include notifying the patient as well as media and the Secretary of Health and Human Services in certain circumstances.

5. Conclusion

Physicians, physician groups and hospitals need to adopt a properly drafted social media policy for the following reasons:

- The FSMB has presented evidence of growing concerns about physician use of social media that require properly drafted social media policies.
- Best practices for use of social media in medical practices requires following of both medical ethics and legal rules.
- In the social media context, following good practices is neither obvious nor intuitive for a physician.
- Without a good Social Media Policy, the risk is increased that the entire medical practice group or hospital may be liable for the actions of a single physician.
- A physician's failure to follow best practices in using social media and applicable privacy and other laws can result in serious disciplinary proceedings and harmful consequences to the physician and the patient, or both.

For more information regarding the Model Guidelines for use of Social Media, please contact Paul C. Van Slyke at (713) 226-1774 or pvanslyke@lockelord.com; Jennifer L. Rangel at (512) 305-4745 or jrangel@lockelord.com.

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