

Twitter 102: Molding the Power

Frank Cacace, MD, FACP

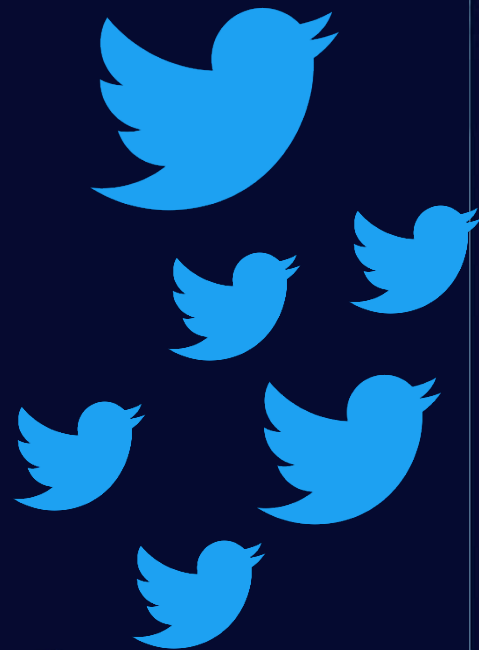


@cacace_frank

Maria Torroella Carney, MD, FACP



@Mcarneymd



Frank Cacace MD FACP

@cacace_frank Follows you

General Internist / Clinician Educator. #proudtobeGIM. #meded. Nutty collector of vintage baseball cards. Opinions mine

📅 Joined July 2017

Maria T. Carney MD

@MCarneyMD Follows you

Chief, Geriatrics & Palliative Medicine @ Northwell Health System and Hofstra SOM; ACP Fellow; Former Commissioner Nassau County DOH -opinions are my own.

📍 Long Island, New York 🔗 northwell.edu/geriatrics-pal... 📅 Joined June 2011

AAMC NEWS

MEDICAL EDUCATION



Tuesday, February 21, 2017 | by Toni Gallo

Twitter Is Trending in Academic Medicine



JMIR Public Health and Surveillance
A multidisciplinary journal that focuses on public health and technology

publichealth.jmir.org

Twitter and Public Health (Part 1): How Individual Public Health Professionals Use Twitter for Professional Development

Mark Hart, EdD, MALS, Nichole E Stetten, MPH, CPH, [...], and Katherine Pizarro, BHSc

Why Twitter? Does it matter?

Journal of Graduate Medical Education[®]

A Toolkit for Medical Education Scholars

Gail M. Sullivan, MD, MPH

ORIGINAL ARTICLE

THE IMPACT OF SOCIAL MEDIA ON CONTEMPORARY SCHOLARSHIP



Social Media and the 21st-Century Scholar: How You Can Harness Social Media to Amplify Your Career

Teresa M. Chan, MD, MHPE^a, David Stukus, MD^b, Jimmie Leppink, PhD^c, Lina Duque, MBA^d, Blair L. Bigham, ACPf, MSc, MD^e, Neil Mehta, MBBS, MS^e, Brent Thoma, MA, MD, MSc^f

1. Go to Twitter.com or
Apple app store



2. Sign-up or Sign-in

3. Choose a picture for your
profile

4. Find: Frank Cacace or
Maria Carney

Follow

5. Click

Edit profile

6. Go to your profile
add a description:
#twitternist who loves....



Breakout 1 – Get on Twitter – 5 minutes



1. Go to Twitter.com or
Apple app store



2. Sign-up or Sign-in

3. Choose a picture for your
profile

4. Find: Frank Cacace or
Maria Carney

Follow

5. Click

Edit profile

6. Go to your profile
add a description:
#twitternist who loves....



Objectives

Reputation Management: Do's and Do not's

Beyond the basics: Re-tweets, Hashtags, @'s, penning your own

MedEd and Promotions: elevating your teaching, learning, and promotion

Community: building a virtual village

Restrict
Facebook

Set up a
Google Alert
for your
name

Claim Your
Profile on
Doximity

Reputation Management
How to monitor your Online Presence

Link profiles:
Linkedin,
Doximity,
Twitter

Remove
Unnecessary
Publicly
Available Info

Do's

ENGAGE meaningfully and discuss **RESPECTFULLY**

RESPOND to your followers and **HIGHLIGHT** others

SHORTEN LINKS if able and **LIMIT** hashtags

Do Not's

ARGUE unless intellectual be **DISRESPECTFUL**

Share **PERSONAL** Information
ie) cell phone, address

Tweet **MEDICAL ADVICE** to patients

Objectives

Reputation Management: Do's and Do Not's

Beyond the basics: Re-tweets, Hashtags, @'s, penning your own

MedEd and Promotions: elevating your teaching, learning, and promotion

Community: building a virtual village

Breakout 2 – 5 min

Find the right people and organizations to follow

- It may be publically shared who you follow
- If you respect someone, follow them and find out who they are following
- If you like certain organizations, follow them

Example:

What is your favorite journal? Search. Follow.



Retweeting: great place to start

- Find tweets you like
- Find articles you like
- Find media – video/lectures – you like

Tagging: great way to increase following / start a conversation

- Okay to tag companies
- Okay to tag people you know or experts



Hashtags: great choice to increase momentum about a topic

- Max 3 per tweet
- Can build it into the tweet sentence / phrase itself

Penning your own: you are ready when you feel it

- Always re-read what you write
- If upset/passionate, pause before tweeting
- Do not be offensive



Breakout 3 – 5 minutes

1. Re-tweet a tweet
 1. Use a hashtag #
 2. Tag someone (eg @cacace_frank or @mcarneymd)
2. Introduce yourself by sending your first tweet
 1. Use a hashtag #
 2. Tag someone (eg @cacace_frank or @mcarneymd)

Objectives

Reputation Management: Do's and Do Not's

Beyond the basics: Re-tweets, Hashtags, @'s, penning your own

MedEd and Promotions: elevating your teaching, learning, and promotion

Community: building a virtual village

**Tweeting an article,
news story, or
pertinent media**

**Dissemination of work
to wider audience**

**Networking with other
experts or institutions**

**Sponsorship of early,
mid-career, senior
faculty**

**Sponsorship of
residents / fellows**

Advocacy

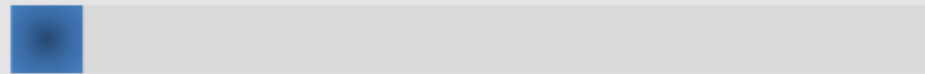
Why be active with social media?

**60% of Physicians say their most popular, activity on social media =
Following what colleagues are sharing and discussing.**

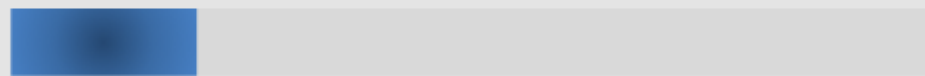
- CREATE
- SHARE
- PARTICIPATE
- LEARN
- CONNECT
- ADVOCATE

Levels of Social Media Engagement

Content Producers



Content Commentators & Curators



Passive Content Consumers



referralMD, 30 Amazing Mobile Health Technology Statistics for Today's Physician, 2017; See also, 2015 HIMSS Mobile Technology Survey, April 2015.

Tweeting an article, news story, or pertinent media



Ankita Sagar, MD, FACP
2019 study: NO LINK btw
[@ACPinternists](#)

Repeat after me: Vaccines

(Disclaimer: I am an intern

bit.ly/2EAhFZw

Measles, M Vaccinatio Nationwid

Article, Author, and

JUMP

2

7



Steven Chen @DrStevenTChen · 10h

So how do you pick the right steroid? First, we should discuss how they're categorized. There are 7 classes. Class 1 is strongest, class 7 is weakest (eg: what you can get OTC).

Thanks to [@NPF](#) for the steroid chart!
5/

Brand name	Generic name		
CLASS 1—Superpotent			
Chlorbutol/Spray/Supergel, 0.25%	Chlortetracycline	Keratog Cream/Spray, 0.1%	Triamcinolone acetonide
Corban Tape, 0.25%	Fluorouracil	Synalar Ointment, 0.05%	Fluocinolone acetonide
Corban Cream/Solution, 0.25%	Chlortetracycline	Topical LP Cream, 0.05%	Decomimetasone
Opordone Ointment, 0.05%	Betamethasone dipropionate	Topical LP Ointment, 0.05%	Decomimetasone
Ola & Foam, 0.25%	Chlortetracycline	Westcott Ointment, 0.2%	Hydrocortisone valerate
Ola Foam, 0.25%	Chlortetracycline	CLASS 5—Lower Mid-Strength	
Puocan Ointment, 0.05%	Diflucan & acetate	Capes Shampoo, 0.01%	Fluocinolone acetonide
Puocan E Ointment, 0.05%	Diflucan & acetate	Corban Cream/Lotion/Tape, 0.05%	Fluorouracil
Tetraolone Cream/Ointment/Solution, 0.05%	Chlortetracycline	Cultrate Cream/Lotion, 0.05%	Fluocisone propionate
Topical Topical Spray, 0.25%	Decomimetasone	Dermidip Cream, 0.1%	Prednicarbate
Ultimate Cream/Ointment, 0.25%	Hydrocortisone	DeoDeo Lotion, 0.25%	Desonide
Ultimate Lotion, 0.25%	Hydrocortisone	Locoid Cream/Lotion/Ointment/Solution, 0.1%	Hydrocortisone
Verox Cream, 0.1%	Fluocinolone	Panfol Cream, 0.1%	Hydrocortisone
CLASS 2—Potent			
Opordone Cream AP, 0.05%	Betamethasone dipropionate	Synalar Cream, 0.01%/0.01%	Fluocinolone acetonide
Blasen Ointment, 0.1%	Mometasone furoate	Westcott Cream, 0.2%	Hydrocortisone valerate
Plonox Ointment, 0.05%	Diflucan & acetate	CLASS 6—Mid	
Halog Ointment Cream, 0.1%	Halobetasol	Adivate Cream/Ointment, 0.05%	Allitretasone dipropionate
Labi Cream/Gel/Ointment, 0.05%	Fluocinolone	Derma-Smooth/PS Gel, 0.01%	Fluocinolone acetonide
Puocan Cream, 0.05%	Diflucan & acetate	Desonate Gel, 0.05%	Desonide
Topical Cream/Ointment, 0.25%	Decomimetasone	Synalar Cream/Solution, 0.01%	Fluocinolone acetonide
Topical Gel, 0.25%	Decomimetasone	Verbeso Foam, 0.25%	Desonide
CLASS 3—Upper Mid-Strength			
Cultrate Ointment, 0.05%	Fluocisone propionate	CLASS 7—Least Potent	
Labi-C Cream, 0.05%	Fluocinolone	Celastrol Lotion, 0.01%/1%	Hydrocortisone
Verox Foam, 0.12%	Betamethasone valerate	Coraid Cream/Spray/Ointment	Hydrocortisone
		Hytone Cream/Lotion, 1%/2.5%	Hydrocortisone
		Micort HC Cream, 2%/2.5%	Hydrocortisone
		Nutracol Lotion, 1%/2.5%	Hydrocortisone
		Spracort Cream, 1%/2.5%	Hydrocortisone

1

↻

11

↑



Steven Chen @DrStevenTChen · 10h

You might notice that some steroids appear in multiple categories (eg: betamethasone dipropionate is in both class 1 and class 2). That's because the strength of the steroid depends on the concentration AND the vehicle.

Ointments >> Creams >> Lotions

a

MD · Apr 27

s' Health Threat - The New York Times



to

us' Health Threat

has begun four studies intended to define
nbat it.

3

↑

Dissemination of work to wider audience



Liron Sinvani @LSinvani · Apr 15
We are conducting a national hospitalized patients with den and share. @SHMLive @Amer @acphospitalist @gnjournal

Northwell Health @

If you are a healthcare profe with dementia, our research consider completing this na



Ankita Sagar, MD, FACP @sagar_ankita · Apr 22
My take on first ever @ACPinternists Hackathon with @mithackmed Thanks to my Hacking team inc. @homatropine @

Can't wait to do more challenges for @Northwell @NorthwellHealth @NewYorkACP

#MedTwitter #SoMeDocs #WomenInMedicine

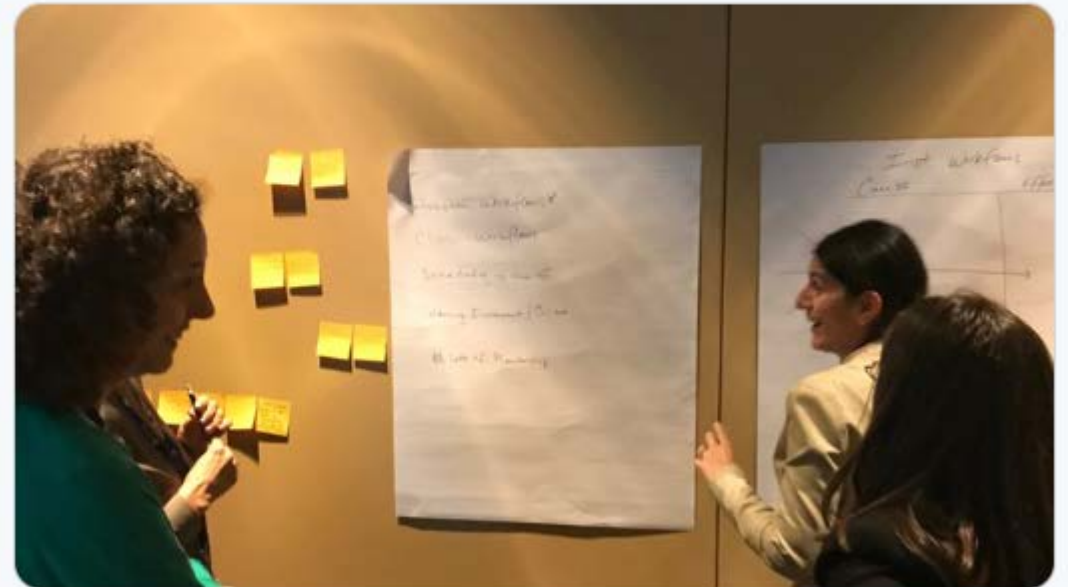


My 4 Learnings From My First 'Hackathon'
Medicine is a competitive team sport. It's true – together a group of "Type A" personalities and j
opmed.doximity.com



Frank Cacace MD FACP @cacace_frank · Apr 15
#AIMW19 inspired #meded highlight of the week - thread:

So today was a good meded day - Jen Verbsky/Jason Ehrlich (APDs @HofstraMed @NorthwellIDGIM) and I shared a session demonstrating how the skill sets of modified nominal group technique & fishbone diagrams..->



2 4 14

Networking with other experts or institutions

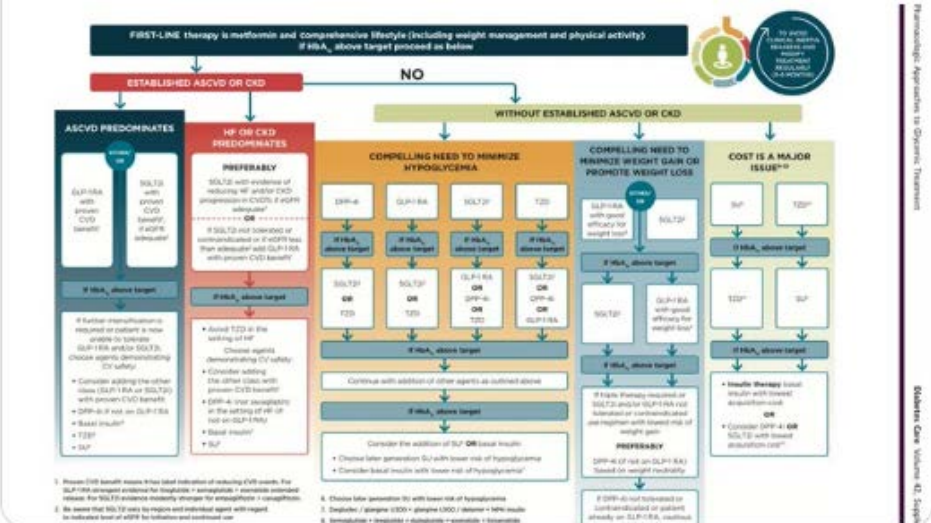


Frank Cacace MD FACP @cacace_frank · Apr 25

Just did didactic on such a T2 #diabetes treatment schema 4our residents & pharmacy/PA students this week. Sorry 2say the self pay & #Medicaid patients they see are in the far right sequence, whereas insured patients have a better chance of receiving newer meds #disparities 🇺🇸

Mario Funes MD @MarioFunesMD · Apr 23

Primary care and IM should start using it more often. Even ADA diabetes care 2019 updated its recommendation this year. CREDENCE further supports this with even decrease GFR and ACE/ARB use. #NephJC



Frank Cacace MD FACP @cacace_frank · Apr 27

Thank you - this is excellent!

Susan Sawning @SSawning · Mar 28

Excited to share w/ #MedEd! #eQualityToolkit: Practical Skills for LGBTQ and DSD-Affected Pt Care: ir.library.louisville.edu/medicine_ume/1/ TY to @NIHCMfoundation, our #LGBTQ community, & Weingartner, ...



2 4

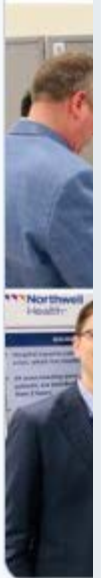
3 3

Sponsorship of early, mid-career, senior faculty



Zucker/Northwell Internal Medicine @HofstraMed · Mar 27
So proud of all our amazing hospitalists!

Li
@No
Stron



Frank C
Hello #
you all.
compas

Al
1/ Inte
Agree
"w
more
ext
Show



Thomas McGinn @TomMcGinn4
These are basic but esser
fragile, and frequent use
financial incentives being
[@FittermanNick](#) [@sagar](#)



Frank Cacace MD
Awesome read to help
domains of our system
centered. Shameless p
twitter.com/commonw

1 1



Thomas McGinn @TomMcGinn4 · Apr 14, 2018

Great SGIM meeting always reinvigorated when I return. Proud of Northwell/Hofstra DGIM strong showing of cutting edge clinical science, education, quality, patient care, and advocacy Cheers! [@HofstraMed](#) [@NorthwellDGIM](#) [#sgim18](#) [@cacace_frank](#) [@NALaVine](#) [@sagar_ankita](#)



Nancy LaVine MD @NALaVine · Apr 14, 2018

Amazing representation (just a sample here!) from [@NorthwellDGIM](#) [@HofstraMed](#) at [#SGIM2018](#). Not just docs either - pharm and psychology too!! [#interprofessionalcare](#) [@IMPACcT_IPE](#) Great leadership [@JoeCMD](#) ...



4 9

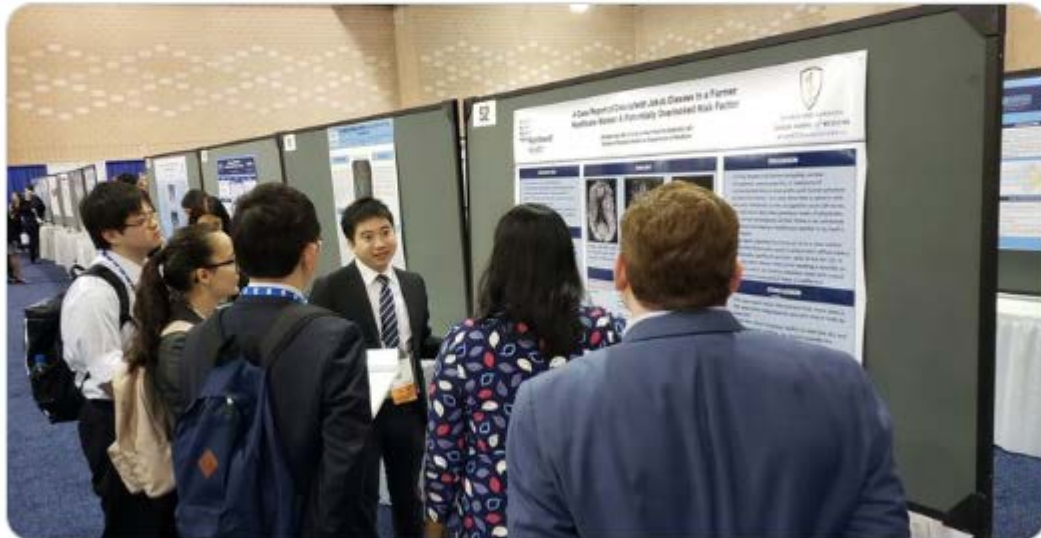
Sponsorship of residents / fellows



Ankita Sagar, MD, FACP @sagar_ankita · Apr 12

Proud of @HofstraMed @IMPACcT_IPE @NorthwellDGIM resident, Dr. Matthew Lee presenting his poster at #im2019 @ACPinternists

@TomMcGinn4 @cacace_frank @KarenFriedman9 @NALaVine @JoeCMD



1 12



Zucker/Northwell Internal Medicine @HofstraMed · Mar 8

What an honor to hear Dr. Harold Varmus speak! Congrats to our PGY-3 Neal Murphy on his induction into AOA! @ZuckerSoM @HofstraMed @TomMcGinn4 @KarenFriedman9 @NorthwellDGIM @NorthwellIDHM



1 7

Advocacy



Ankita Sagar, MD, FACP @sagar_ankita · Mar 4

"The opioid epidemic is really a syndemic, meaning it's composed of multiple, concurrent epidemics — driven both by prescription pain medication and by illicit heroin and fentanyl."

If the cause is multi-factorial then solution needs to be as well.



Maria T. Carney MD @MCarneyMD · Apr 21

Please read. "Policy makers must understand the importance of optimizing access and productivity and develop meaningful time for care." | Shared Decision Making in Primary Care | JAMA | JAMA Network



Time: The Critical Ingredient
This Viewpoint characterizes a key element of shared patient-centered care.
jamanetwork.com

The Opioid Dilemma
Limiting prescription pain medication actually increase demand for illicit drugs.
nytimes.com



Maria T. Carney MD @MCarneyMD · Apr 19

Kentucky's Senator McConnell Supports Bill to Raise Minimum Age to Buy Tobacco to 21 via [@NYTimes](http://nytimes.com)



Senator McConnell, a Tobacco Ally, Supports Raising Age to Buy Cigarettes
Seeking re-election to a seventh term, the senator cited the rise in teenage vaping as a reason to curtail sales of tobacco and other products.
nytimes.com

Objectives

Reputation Management: Do's and Do Not's

Beyond the basics: Re-tweets, Hashtags, @'s, penning your own

MedEd and Promotions: elevating your teaching, learning, and promotion

Community: building a virtual village

“

*The Internet is becoming the
town square for the global
village of tomorrow
- Bill Gates*

Key Hashtags

- ✓ #MedEd
- ✓ #medtwitter
- ✓ #somedocs
- ✓ #twitternists
- ✓ #womeninmedicine
- ✓ #internistswhoread
- ✓ #7books
- ✓ #womeninmedicine
- ✓ #burnout
- ✓ #moralinjury
- ✓ #GeriPal

Key Twitter Accts

- ✓ @Cacace_Frank
- ✓ @MCarneyMD
- ✓ @Sagar_Ankita
- ✓ @drstaceyrosen
- ✓ @DrJMieres
- ✓ @NinaWincoffMD
- ✓ @womeninmedchat
- ✓ @sheMDTweets
- ✓ @TIMESUPHC
- ✓ @SocietyGIM
- ✓ @ACPinternists
- ✓ @HofstraMed

Breakout 4

1. Connect your touch points
 - Put your twitter handle on Posters, email signature, powerpoints
2. Have a plan
3. Follow progress – twitter analytics

Now it's
YOUR turn!

1. Go to Twitter.com or
Apple app store



2. Sign-up or Sign-in

3. Choose a picture for your
profile

4. Find: Frank Cacace or
Maria Carney



5. Click



6. Go to your profile
add a description

