



White Paper

Social Media, Podcasts, and Blogs on a Residency/Fellowship ERAS Application

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Abstract

Communication tools for physicians and physicians in training have been revolutionized by the expansion of social media and many other digital resources. The traditional paradigm of acceptable scholarly work is being challenged by the expansion of social media such as: blogs, podcasts, and platforms like Twitter, Facebook and Instagram. There is growing evidence that these venues are also being utilized to share high-quality, educational, and creative work. Recent conversations in the medical literature, podcasts, and social media have questioned how to display and quantify such contributions on a traditional professional curriculum vitae (CV). A previously published White Paper ("[Social Media, Podcasts and Blogs on a Professional Curriculum Vitae](#)") aimed to tackle these questions, and more work remains to be done for validating metrics of impact and reach of such novel scholarship.

Medical students applying for residency and residents applying for fellowship using Electronic Residency Application Form (ERAS) are confronted with similar questions around the submission of their social media contributions. In this White Paper, we aim to provide guidance around the decision to include or not include mission-driven social media contributions in the ERAS application for prospective residents and fellows. Additionally, tools are provided for amplification of Personal Statements, interviews, and letters of recommendation. Suggestions are also presented around content not to include.

Problem Statement

How to best capture and convey the impact of "non-traditional" scholarship such as formal educational content released on social media has quickly become an important question for physicians as well as other members of the health professions. The original White Paper published by Explore the Space, LLC, aimed to address the question of if and how such creative work should be included on a professional CV. This White Paper aims to provide guidance specifically for medical students applying for residency and residents applying for fellowship using the ERAS CV template as well as in preparation for subsequent interviews and creating Personal Statements.

Disclaimer

Please note that this white paper is not meant to substitute for the advice of a trusted residency advisor or a faculty who knows your personal situation and the culture of your specialty or the institution you are applying to. All recommendations below assume that the social media activity that a student is engaging in is presenting the student in a positive light. If for any reason you have a doubt about how your social media work would be received, or if you should include it at all, we encourage you to seek the counsel of a faculty advisor who is most familiar with your application packet.

Source and Expert Panel

This White Paper builds from the foundation of "[White Paper: Social Media, Podcasts, and Blogs on a Professional Curriculum Vitae](#)", which was released on 4/10/2019. That document was derived from an episode of Explore the Space recorded on March 26, 2019 with Drs. Vineet Arora, MD, MAPP, Mark Shapiro, MD, and Charlie Wray, DO, MS and released on April 2, 2019.

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Dr. O'Glasser is an Associate Professor of Medicine, a hospitalist at Oregon Health & Science University (OHSU), and serves as the Medical Director of OHSU's Pre-Operative Medicine Clinic. She is also the Assistant Program Director for Social Media and Scholarship for OHSU's Internal Medicine Residency Program. Through this role, she has developed a professional niche on the intersection between social media, resident and medical student education, and academic medicine. She is responsible for creating OHSU's Internal Medicine Residency Program's Twitter account (@OHSUIMRes). In addition to using Twitter for dissemination of original medical educational content, she delivers lectures and workshops regionally and nationally on the impact and effectiveness of Twitter in medical education and medical professional development. She is also active on communications committee for multiple professional organizations, spearheading Twitter accounts for the Oregon Chapter of American College of Physicians (@OregonACP) and The Society for Perioperative Assessment and Quality Improvement (@SPAQledu).

Charlie Wray, DO, MS

Dr. Wray is an Assistant Professor of Medicine at the University of California, Francisco (UCSF) and a practicing Hospitalist and health services researcher at the San Francisco VA Medical Center. He completed medical school at Western University – College of Osteopathic Medicine, Internal Medicine residency at Loma Linda University Medical Center, and a Hospital Medicine Research Fellowship at The University of Chicago. Dr. Wray's research interests have focused on inpatient care transitions and care fragmentation in the hospital setting, over-utilization of hospital resources, and the use of telemedicine-based resources to improve care for socially- vulnerable patients. Additionally, Dr. Wray is an Associate Editor and Deputy Digital Media Editor for the Journal of Hospital Medicine (JHM) where he helped establish the use of Visual Abstracts and the Twitter-based journal club; #JHMChat. Dr. Wray is also the Director of the JHM Editorial Fellowship.

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Dr. Arora is a Professor of Medicine and serves as Associate Chief Medical Officer, Clinical Learning Environment at University of Chicago Medicine and Assistant Dean for Scholarship and Discovery at the University of Chicago Pritzker School of Medicine. As a healthcare leader who bridges medical education, systems science, and sleep medicine, she transforms learning and care delivered in teaching hospitals. She is an elected member to the American Society of Clinical Investigation, which recognizes physician-scientists for their biomedical research, and serves on the American Board of Internal Medicine Board of Directors. She has been named as one of 10 MDs to follow on Twitter by Becker's Healthcare and serves as Deputy Editor, Social Media at Journal of Hospital Medicine. As an advocate for gender equity across healthcare, she is a founding member of Women of Impact, a 501c3 dedicated to advancing women leaders in healthcare and TIME'S UP Healthcare.

Mark Shapiro, MD

Dr. Shapiro currently serves as Associate Medical Director for Hospital Services with St. Joseph Health Medical Group-Sonoma County and has 13 years of clinical experience as a Hospitalist in full time non-academic practice. He is also the creator and host of Explore The Space podcast, which looks at the interface of healthcare and society while seeking to close gaps between those providing healthcare and those seeking it. Dr. Shapiro has also been featured on numerous podcasts and articles both for his work in the podcasting space as well as around disaster management for physicians. He previously served as Medical Director for Hospital Medicine at Santa Rosa Memorial Hospital and Chief of Medicine at Sharp Memorial Hospital.

Background

Communication for and by physicians, and physicians in training, has dramatically changed in the 21st century with the expansion of social media platforms. The explosion of online publishing in the form of blogs, podcasts, and platforms like Twitter, Facebook, and Instagram has disrupted the long-standing traditional paradigm of scholarly work only reflecting peer-reviewed publication in print journals or invited lectures/conference presentations.

While still in its nascency, the value and impact of social media for physicians and other healthcare providers is being captured and disseminated by thought leaders in the field. In May 2016, The Mayo Clinic announced that it would include social media scholarship activities in academic advancement (Cabrera 2016). It is safe to say the vast majority of rising residents and fellows are engaged in one or more social media platforms. In many cases, this engagement is directly related to their professional pursuits, i.e. mission-driven.

Akin to the traditional professional CV being an important document to house social media contributions, we argue that such activity has a role in the ERAS application, Personal Statements, and interviews. Moreover, these submissions will empower residency application reviewers to glean personality traits that may be weighed strongly during the resident selection process: creativity, self-directed learning, professionalism, collaborative skills, multidisciplinary communication, and humanism.

Suggestions provided in "Social Media, Podcasts and Blogs on a Professional Curriculum Vitae" capitalized on the flexible nature of a traditional CV to insert an outline of social media work in a new, separate section. Given the standardized format of the ERAS application, we will aim to provide guidance for how to utilize this template. We will also extend suggest innovative ways to highlight the impact and reach of social media work during other elements of the application and interview process such as interviews, personal statements, and letters of recommendation.

The following should be viewed as suggestion and as the personal opinions of this papers' authors based on their experience with social media and roles in physician and resident recruiting. This information has not been vetted with or approved by ERAS or residency program directors.

Conclusions

I. Digital Media Including Podcasts, Blogs, and Social Media Belong on the ERAS Application

- a. This is the unanimous opinion of the authors.
- b. The ERAS template should be utilized to demonstrate your interests in, and commitment to, your chosen residency specialty, show your output to date and its impact on the world, and how you have differentiated yourself as a student.
- c. If a student's work in these novel digital spaces relates to their professional pursuits and demonstrates unique strengths and skills as a physician in training, then it should be included in the residency application.

II. Impact & Engagement Should be Measured and Shared Using the Standard Format of the ERAS Application

- a. This will be crucial to convey especially in early non-traditional utilization of the ERAS template, especially as many residency program application review committees may be unaware or even skeptical of the validity and importance of work done on digital platforms.
- b. Any data of impact and reach as well as the robust, intentional time and effort that it takes to produce such work should be conveyed—including but not limited to size of audience, downloads, views/reads, impressions, other/external blog mentions, CME available.
- c. We also encourage familiarity and utilization of Almetrics Scores, which capture measures of social media based dissemination, for traditional publications on the ERAS application.

III. Positions & Contributions to Include

- a. Blogs
 - i. Founder
 - ii. Production/maintenance
 - iii. Routine contributor
 - iv. Guest contributor
- b. Podcasts
 - i. Founder
 - ii. Production/maintenance
 - iii. Host
 - iv. Routine co-host contributor
 - v. Guest contributor
- c. Social Media (ex. Twitter, Facebook, Instagram)
 - i. Mission-driven content which demonstrates values and skills
 - ii. Starting/hosting Journal Club/Chat
 - iii. Founding/maintaining organizational social media account with demonstrable impact and memberships
 - iv. YouTube content with associated metrics

- d. Other Content
 - i. Art, illustration, cartooning including graphic medicine
 - ii. Filmmaking
 - iii. Live content

IV. Where to Enter on ERAS

- a. Traditional CV entries are bucketed on the ERAS application under types of experience. We recommend utilizing these predefined fields for the above potential types of contributions as follows. ERAS also includes fields for “dates” “average hours/week”, which will be important to estimate as a measure of duration and extent of meaningful contributions. Utilize the “description” field to describe the nature of the work, your role, and quantitative and qualitative measures of impact and reach:
 - i. Research Experience
 - 1. Recommend reserving for longitudinal projects analyzing the scholarship of dissemination for non-traditional platforms
 - ii. Volunteer Experience
 - 1. Recommend reserving for longitudinal contributions to leadership positions as they relate to the above platforms, including founders, regular contributor (as opposed to intermittent guest), and production staff, ex.:
 - a. Blog founder/regular contributor
 - b. Podcast founder/(co)host/regular contributor/producer
 - c. Organizational social media account lead/contributor
 - d. Social media journal club/chat founder/host
 - iii. Work Experience
 - 1. Likely less applicable than “volunteer experience”
 - 2. Avoid entering paid endorsements here (see further below)
- b. **Publications**
 - i. Guest contributions to podcasts, appropriately cited as individual episodes
 - ii. Guest contributions to blogs, appropriately cited as individual articles
- c. **Hobbies & Interests**
 - i. Highly appropriate location to share general interest in social media, #MedTwitter, #hscsm (health care social media) even if not routinely contributing
 - 1. Share recurring participation in online/social media-based journal clubs/chats if no “leadership” position
 - 2. Consider sharing advocacy interest/work using social media here
 - ii. Highly appropriate location to share general interest in reading medical blogs and/or listening to podcasts even if not routinely contributing
 - iii. Even if discrete entries are listed under “publications”, this may a duplicate and appropriate means to capture and more broadly describe robust and sustained contributions to blogs, podcasts, or social media

- iv. Provider Twitter handle here if comfortable sharing (highly encouraged if you are including your work on social media elsewhere on the application)

d. Other Awards/Accomplishments

- i. Considering entering more sustained and robust contributions, especially those that reflect founding or early roles in launching platforms/venues here, especially if there are available metrics of significant impact and reach

V. Additional Opportunities to Capture Social Media Contributions During the Application Process

a. Personal Statement

- i. Consider referencing how novel platforms have contributed to your self-reflection, identify formation, and personal development as an applicant
- ii. Discuss whether if modeling and mentoring achieved through such platforms has provided formative experiences driving your choice of specialty
- iii. Reference leadership roles or sustained contributions to the above platforms, especially as they relate to professional development and choice of specialty

b. Interviews

- i. Interviews are another opportunity to expand on one's novel contributions. We agree with the adage, "if it's on your ERAS, it can be asked about in an interview". Frequently, we advise students to put items on their ERAS that they hope to be asked about. Highlighting novel contributions potentially invites further conversation.
- ii. Be aware of the potential for skepticism on the part of an interviewer and be prepared to define and even defend its value and impact as well as the reach of your individual work.

VI. Content to Avoid

- a. Paid endorsements
- b. Links to accounts used only/solely for personal reasons
- c. Material with potential conflict of interest or separate from your intended goal
- d. Any content that reflects poorly on the individual

Final Thoughts

The various components of social media have become hugely important in the profession of medicine. Rising residents and fellows have an important opportunity to demonstrate their mission-driven social media contributions to our profession through the ERAS application, personal statement, and interviews. They are also already providing robust, impactful, and longitudinal contributions to scholarly and creative work and leadership positions through these platforms. As such, we find it crucial for them to be able to convey and capture the impact and reach of their work on residency applications.

Additionally, such inclusion provides application reviewers and interviewers important information about candidates they would benefit from knowing and understanding.

The above framework represents an approach based on our opinions derived from our professional work. We cannot predict how such content will be assessed by residency programs or incorporated into applicants' global assessments. This work was also created without input from ERAS itself. Please feel free to reach out to the authors via email or Twitter with questions or feedback.

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