

#hcsn - November 24, 2013

6:00



[HealthSocMed | #hcsn@HealthSocMed](#)



Welcome to ([#hcsn](#)) healthcare communications & social media. If you're joining tonight, please introduce yourself! ([@danamlewis](#) moderating)

6:00



[T2D Research@T2DRemission](#)



Wasn't sure I'd make it. Michael Massing, here to learn. [#hcsn](#)

6:00



[Andrew Lopez, RN@nursefriendly](#)



[@DrBeckerSchutte](#) Ha, ha - Great to see you here Ann :) [#hcsn](#)

6:00



[Cincinnati MSTP@CincinnatiMSTP](#)



First [#hcsn](#) chat! Excited!

6:00



[Garry Choy, MD MBA@GarryChoy](#)



Great idea “[@giasison](#): WHAT IF patients designed experience surveys? fiercehealthcare.com/story/what-if-... (Great read) [#hcsn #health](#)”

6:00



[Joyce Lee, MD, MPH@joyclee](#)



RT [@GarryChoy](#): Great idea “[@giasison](#): WHAT IF patients designed experience surveys? goo.gl/mmYv76 (Great read) [#hcsn #health](#)”

6:00



[Health Meets Tech@myHealthImpact](#)



On for the chat. Let's make it another good one before the Thanksgiving holiday. [#hcs](#)

6:01



[Yinka Vidal@YinkaVidal](#)



[#Hcs](#) Hi everybody! Yinka from St. Louis

6:01



[Nrip Nihalani@nrip](#)



MyHealthApps aims to help bring the technology into mainstream healthcare [ow.ly/r8tJi](#) [#hcs](#) [#healthIT](#) [#mHealth](#)

6:01



[Nrip Nihalani@nrip](#)



MyHealthApps aims to help bring the technology into mainstream healthcare [shrd.by/4CKjt8](#) [#hcs](#) [#healthIT](#) [#mHealth](#)

6:01



[Ron Mills@O2ron](#)



[@CincinnatiMSTP](#) welcome. Hang on tight. [#hcs](#)

6:01



[Bill Wong@BillWongOT](#)



hello everyone- Bill from Monterey Park, California. [#hcs](#)

6:01



[HealthSocMed | #hcs@HealthSocMed](#)



We will assume all tweets within [#hcs](#) during following hour are your own & not those of your employers (unless

specifically declared).

6:01



[Anne Dang, CCPA@AnneCCPA](#)



[@HealthSocMed](#) Anne Dang, Canadian Physician Assistant tweeting from Toronto. Good to be here and see some familiar faces! [#hcs](#)

6:01



[Health Meets Tech@myHealthImpact](#)



[@nursefriendly](#), it is great to see you! [#hcs](#)

6:01



[Lisa Gualtieri@lisagualtieri](#)



Twitter best practices for government, non-profits, etc. [media.twitter.com/best-practices](#)? via [@InesMergel](#) [@MaxwellSU](#) [#hcs](#) [#SocialMedia](#)

6:02



[Marie Ennis-O'Connor@JBBC](#)



[@HealthSocMed](#) hi I'm Marie, patient advocate from Ireland, currently based in Australia on sabbatical [#hcs](#)

6:02



[Alan Brewington@abrewi3010](#)



Alan here! Enjoying my heating pad and looking forward to this chat!!! [#hcs](#)

6:02



[Debra A. Barrath@dbarrath](#)



Hello [#hcs](#) - This is Debra from Los Angeles! I'm happy to be here!

6:02



[Health Meets Tech@myHealthImpact](#)



[@marksalke](#), glad to see you again. [#hcs](#)

6:02



[Ron Mills@O2ron](#)



Ron Mills here, Evanston, Illinois, startup addict and all-around healthcare/science communicator/strategist. [#hcs](#)

6:02



[Andrew Lopez, RN@nursefriendly](#)



[@myHealthImpact](#) [#hcs](#) No worries, this is always one of the better chats on the [#healthcare](#) [#tweetchat](#) circuit ;)

6:02



[Dana Lewis | #hcs@danamlewis](#)



[@abrewi3010](#) ::waves:: [#hcs](#)

6:03



[MDCapsule@mdcapsule](#)



RT Thanks: [@jasonbereklewis](#): . [@mdcapsule](#) builds fun, easy way to connect doctors and patients [healthystartups.com/founders-blog/...](#) [#hcs](#) [#startupschool](#)

6:03



[Steven Incontrera@Steven_Paul](#)



I'm sorry but I have to start off tonight's [#HCSM](#) with a "Go Cowboys". Hello everyone Steven from [@RxWiki](#) [@dailyRx](#) and [@PCM_inc](#) here.

6:03



[Laurel Ann Whitlock@twirlandswirl](#)



Laurel, photographer in Orlando. Been chasing rockets lately, here's something pretty: [flic.kr/p/hEjqd1](#) Glad to be here again! [#hcs](#)

6:03



[Charles Lehman@3Lehman](#)



[@Steven_Paul](#) Dan Bailey! [#hcsn](#)

6:03



[Nick Dawson@nickdawson](#)



[@abrewi3010](#) hey Alan! [#hcsn](#)

6:04



[Yinka Vidal@YinkaVidal](#)



[#hcsn](#) Hi Jeniffer Hi Ann. The world isn't ready to end yet. I think. Just a few days before Thanksgiving!

6:04



[Dana Lewis | #hcsn@danamlewis](#)



(if people here are going to try to talk football, I have just two words: Roll Tide. ;)) [#hcsn](#)

6:04



[Jewels@She_Sugar](#)



Hi everyone - Jewels, I'm a nurse/ freelance writer/ live with and parent to chronic disease. [#hcsn](#)

6:04



[Mark Salke@marksalke](#)



Thank you. Likewise! RT [@myHealthImpact](#): glad to see you again. [#hcsn](#)

6:04



[Nick Dawson@nickdawson](#)



[@Steven_Paul](#) ohh then I have to block you :) [#HTTR](#) [#hcsn](#)

6:04



[HealthSocMed | #hcsm@HealthSocMed](#)



Welcome, everyone, to [#hcsm](#)! Special hi to any first-timers joining tonight (:), and of course our friendly lurkers. Tweet in anytime!

6:04



[RxWiki@RxWiki](#)



[@HealthSocMed](#) Hey! Mia from freezing cold and rainy austin (crazy I know) [#hcsm](#)

6:05



[Marie Ennis-O'Connor@JBBC](#)



[@She_Sugar](#) Hi Jewels - I always learn so much from you! [#hcsm](#)

6:05



[Health Meets Tech@myHealthImpact](#)



[@nursefriendly](#) I agree...always a good time with lots of learning. [#hcsm](#)

6:05



[Bill Wong@BillWongOT](#)



[@danamlewis](#) haha! I have one for football- Trojans. :p [#hcsm](#)

6:05



[Robert Mahoney@mahoneyr](#)



Good evening, [#hcsm](#) folks

6:05



[Alan Brewington@abrewi3010](#)



[@nickdawson](#) hi Nick! How did [#medx](#) planning go? [#hcsn](#)

6:05



[Nick Dawson@nickdawson](#)



[@HealthSocMed](#) long time listener, fist time caller [#hcsn](#)

6:05



[Jewels@She_Sugar](#)



[@JBBC](#) thank you- likewise, great to see you! [#hcsn](#)

6:05



[Debra A. Barrath@dbarrath](#)



Hello [@nursefriendly](#)! So glad to make it - this is my first hcsn chat! Happy Thanksgiving week!

6:06



[Ann Becker-Schutte@DrBeckerSchutte](#)



HA!! RT [@nickdawson](#) [@HealthSocMed](#) long time listener, fist time caller [#hcsn](#) [#hcsn](#)

6:06



[Laurel Ann Whitlock@twirlandswirl](#)



[@BillWongOT](#) [@danamlewis](#) Go Gators! [#inallkindsofweather](#) [#hcsn](#)

6:06



[Health Meets Tech@myHealthImpact](#)



[@JBBC](#) Great to see you, Marie. You always add much to the discussion. [#hcsn](#)

6:06



[Mia Behm@saymybehm](#)



[@HealthSocMed](#) Hey! Mia here from freezing cold and rainy austin, tx! (crazy I know) [#hcs](#)

6:06



[Andrew Lopez, RN@nursefriendly](#)



[@myHealthImpact](#) This is discussion group is one of the examples I quote when discussing how great [#SocialMedia](#) and [#Twitter](#) can be :) [#hcs](#)

6:06



[Jewels@She_Sugar](#)



[@nickdawson](#) First timer - shocked! [#hcs](#)

6:06



[Marie Ennis-O'Connor@JBBC](#)



[@myHealthImpact](#) thanks for making my day :-)
[#hcs](#)

6:06



[Alan Brewington@abrewi3010](#)



[@danamlewis](#) Go Denver!!! Broncos are super bowl bound :) [#hcs](#)

6:06



[Ann Becker-Schutte@DrBeckerSchutte](#)



Hi all. Ann here from friendly KC. Psychologist, chat junkie, and all that good stuff. [#hcs](#)

6:07



[P. F. Anderson@pfanderson](#)



Multitasking. Listening to the [@johnmac13](#) radio show [blogtalkradio.com/rapidtalk/2013...](#) while typing for [#hcs](#)

6:07



[Laurel Ann Whitlock@twirlandswirl](#)



At some point I'm going to have to step away to cook up some sausage... which, strangely, is not a euphemism. ;) [#hcs](#)

6:07



[Jewels@She_Sugar](#)



[@DrBeckerSchutte](#) Nice to see you! [#hcs](#)

6:07



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@twirlandswirl](#) Look at that-we found a chat together. ;-) [#hcs](#)

6:07



[Bill Wong@BillWongOT](#)



[@twirlandswirl](#) [@danamlewis](#) I had an ex-OT classmate who went to Florida for Undergrad. [#hcs](#)

6:07



[Marie Ennis-O'Connor@JBBC](#)



[@nursefriendly](#) Did you read this Andrew? Can A Hashtag Change Healthcare? The Impact of Healthcare Tweet Chats [wp.me/p2oc7R-193](#) [#hcs](#)

6:08



[HealthSocMed | #hcs@HealthSocMed](#)



We'll get started with topic 1 (T1) in just a few minutes. Remember if you jump in to [#hcs](#) later to introduce yourself!

6:08



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@She_Sugar](#) Good to see you too. I always see such great folks here. [#hcs](#)

6:08



[P. F. Anderson@pfanderson](#)



[@twirlandswirl](#) And I wouldn't have even thought of the euphemism if you hadn't said so! Uhhhh [#hcs](#)

6:08



[Susannah Fox@SusannahFox](#)



[@HealthSocMed](#) Susannah Fox, lurking as usual from Washington, DC [#hcs](#)

6:08



[Andrew Lopez, RN@nursefriendly](#)



[@JBBC](#) Hmm, not yet, thanks! I'll check it out . . . [#hcs](#)

6:08



[Robert Mahoney@mahoneyr](#)



Careful, [@pfanderson](#). Several large randomized controlled trials have proven that [#hcs](#) is not a multitasking opportunity.

6:09



[Marie Ennis-O'Connor@JBBC](#)



[@pfanderson](#) [@twirlandswirl](#) Lol - me neither ;-) [#hcs](#)

6:09



[Laurel Ann Whitlock@twirlandswirl](#)



[@pfanderson](#) I'm mentally a 12-year-old boy. There's no treatment available. [#hcs](#)

6:09



[Nick Dawson@nickdawson](#)



[@She_Sugar](#) kidding :) [#hcs](#)

6:09



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@SusannahFox](#) You and [@ReginaHolliday](#) were rocking the "standards for med conferences" brainwave this week! [#hcs](#)

6:09



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) I have noted that. But I keep missing the show! We'll see which wins out :) [#hcs](#) or [@johnmac13](#)

6:09



[Dr. Gia Sison@giasison](#)



Hi all Gia here from Manila! [#hcs](#)

6:09



[Dana Lewis | #hcs@danamlewis](#)



[#hcs](#) everyone have their fingers stretched and warmed up? Diet Coke or beverage of choice at the ready?

6:10



[Nick Dawson@nickdawson](#)



[@abrewi3010](#) we had an amazing weekend, many fun ideas, amazing team. [#hcs](#)

6:10



[Health Meets Tech@myHealthImpact](#)



[@SusannahFox](#) [@HealthSocMed](#) Great work that you do! You are a consistent research reference, [@DrFayOnline](#). See us at [#myhealthimpact](#) [#hcs](#)

6:10



[Andrew Lopez, RN@nursefriendly](#)



[@mahoneyr](#) [@pfanderson](#) Agree, it tends to be an "all consuming" endeavor if you're not careful. [#hcs](#) ;)

6:10



[Mark Salke@marksalke](#)



Welcome. Please join in, Susannah! RT [@SusannahFox](#): [@HealthSocMed](#) Susannah Fox, lurking as usual from Washington, DC [#hcs](#)

6:10



[Marie Ennis-O'Connor@JBBC](#)



[@giasison](#) hi Gia, good to see you again. Are you keeping well? [#hcs](#)

6:10



[T2D Research@T2DRemission](#)



[@twirlandswirl](#) [@pfanderson](#) Hello, fellow sufferer! [#hcs](#)

6:10



[HealthSocMed | #hcs@HealthSocMed](#)



TOPIC 1 - Is it fair to discuss whether HCPs "get it"? Flip side: fair for HCPs to talk about whether pts "get it"/are compliant, etc? [#hcs](#)

6:10



[Carolyn Thomas@HeartSisters](#)



Hello from Canada's west coast, popping in and out because one eye on 3rd quarter of our Grey Cup football final on TV [@danamlewis](#) [#hcs](#)

6:11



[Yinka Vidal@YinkaVidal](#)



[@giasison](#) [#hcs](#) Hi Dr. Sison?

6:11



[Dr. Gia Sison@giasison](#)



[@JBBC](#) Hi Marie all's well Thanks so glad to see you! [#hcsm](#)

6:11



[P. F. Anderson@pfanderson](#)



[@nursefriendly](#) [@mahoneyr](#) I usually end up multitasking with [#doctorwho](#) but have watched abt 4 episodes today already [#hcsm](#)

6:11



[Twice Diabetes@TwiceDiabetes](#)



Hello from Sydney Australia [#hcsm](#)

6:11



[Dr. Gia Sison@giasison](#)



[@YinkaVidal](#) Hello Yinka! [#hcsm](#)

6:11



[T2D Research@T2DRemission](#)



[@pfanderson](#) [@twirlandswirl](#) Great advice, Patricia! [#hcsm](#)

6:11



[Marie Ennis-O'Connor@JBBC](#)



[@giasison](#) great to hear that [#hcsm](#)

6:11



[Bill Wong@BillWongOT](#)



[@twirlandswirl](#) [@danamlewis](#) my undergrad school was 1 where I should wear a paper bag over my head- UC Riverside... no football team. [#hcsm](#)

6:11



[Mark Salke@marksalke](#)



Hi. Welcome! RT [@TwiceDiabetes](#): Hello from Sydney Australia [#hcsn](#)

6:11



[Health Meets Tech@myHealthImpact](#)



[@giasison](#) Hi, Gia! Glad to see you again. Hanging out in great chat spaces. [#hcsn](#)

6:11



[Andrew Lopez, RN@nursefriendly](#)



[@giasison](#) <<<<<< Waving to Dr. Gia [#hcsn](#)

6:11



[P. F. Anderson@pfanderson](#)



[@Steven_Paul](#) [@mahoneyr](#) I will confess I DID set aside the blogpost in progress for the rest of the night [#hcsn](#)

6:11

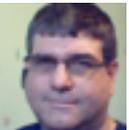


[Marie Ennis-O'Connor@JBBC](#)



[@HeartSisters](#) helllooo there [#hcsn](#)

6:11



[johnmoehrke@johnmoehrke](#)



T1 - I would say that ANY form of transparency that doesn't violate Privacy or Law is a good thing. [#HCSM](#)

6:11



[Jennifer Chevinsky@jchevinsky](#)



T1: totally fair to judge whether HCPs or pts 'get it'... but it should be an open-minded discussion, not based on mere

assumptions. [#hcs](#)

6:12



[KazztheSpazz@KazztheSpazz](#)



I put mango and olives in my salad, hardcore salad maker, yeah that's right! [#HCSM](#)

6:12



[P. F. Anderson@pfanderson](#)



[@HealthSocMed](#) Get what? Social media or the nature of healthcare? [#hcs](#)

6:12



[Twice Diabetes@TwiceDiabetes](#)



T1 Yes it's fair but better if there's dialogue and not they don't get it/they're not compliant. [#hcs](#)

6:12



[Robert Mahoney@mahoneyr](#)



T1 does patient compliance = "getting it", and vice versa? [#hcs](#)

6:12



[Carolyn Thomas@HeartSisters](#)



[@JBBC](#) Hello dear! [#hcs](#)

6:12



[Marie Ennis-O'Connor@JBBC](#)



bit confused by the meaning of T1? [#hcs](#)

6:12



[HealthSocMed | #hcs@HealthSocMed](#)



[@YinkaVidal](#) you mean who is moderating? this is [@danamlewis](#) (moderator for [#hcs](#)m is always announced in first opening tweet!)

6:12



[Mark Dimor@MarksPhone](#)



[@HealthSocMed](#) it should be each repeats what they heard from the other active listening [#hcs](#)m

6:13



[Ron Mills@O2ron](#)



T1: All's fair in love and Twitter shaming. [#hcs](#)m

6:13



[Anne Dang, CCPA@AnneCCPA](#)



[@HealthSocMed](#) Can you clarify what you mean by whether HCPs "get it"? [#hcs](#)m

6:13



[Bill Wong@BillWongOT](#)



[@mahoneyr](#) I want to know, too... since I don't get what the ? is asking. [#hcs](#)m

6:13



[Alan Brewington@abrewi3010](#)



A1 I would say yes to both questions. 2 way communication is the first step in changing/improving HC. [#hcs](#)m

6:13



[Ann Becker-Schutte@DrBeckerSchutte](#)



T1: I think it is fair to talk about communication/understanding in all roles. The language we use to do so really matters. [#hcs](#)m

6:13



[Nick Dawson@nickdawson](#)



T1: one consideration is what "getting it" means? Suspect different things to different people. [#hcs](#)

6:13



[Jennifer Chevinsky@jchevinsky](#)



[@mahoneyr](#) agree! I would say whether they are 'compliant' or not may have nothing to do with their 'getting it' ..so many other factors! [#hcs](#)

6:14



[Jewels@She_Sugar](#)



T1. It's all about perspective - the best loved providers are those that convey empathy not just the ability to "get it". [#hcs](#)

6:14



[HealthSocMed | #hcs@HealthSocMed](#)



T1 comes from recent convo about whether or not HCPs "get it" - understand patients, etc. This Q is about whether it's fair to ask that?

6:14



[Twice Diabetes@TwiceDiabetes](#)



I have 40+ yrs experience of t1diabetes and I have to say most hcp's don't understand t1 diabetes. I feel that should be said [#hcs](#)

6:14



[Nick Dawson@nickdawson](#)



T1: but in general, I think we blame providers and patients as individuals, for what are in fact systems problems. [#hcs](#)

6:14



[Carolyn Thomas@HeartSisters](#)



T1 "Fair to talk about if HCPs/patients 'get it'?" Fair or not, both sides like to talk this way! [@danamlewis](#) [#hcs](#)

6:14



[Health Meets Tech@myHealthImpact](#)



[@HealthSocMed](#), can you clarify Q1? [#hcs](#)

6:14



[Yinka Vidal@YinkaVidal](#)



[#hcs](#) Can always discuss any case without a name or location attached to it. We have done this for years. Name & location create problem!

6:14



[Ann Becker-Schutte@DrBeckerSchutte](#)



T1: And we each need to assume responsibility for clarifying that *we* "get it" and respond appropriately. [#hcs](#)

6:14



[Robert Mahoney@mahoneyr](#)



T1 clearly some PCPs don't "get" their patients; may not mean they don't "get it" [#hcs](#)

6:14



[Steven Incontrera@Steven_Paul](#)



T1 We need a better way to get the doctors voice to the patients ear. [#HCSM](#)

6:14



[Mark Salke@marksalke](#)



Agree. MT [@nickdawson](#): T1: but in general, we blame providers and patients as individuals, for what are in fact systems problems. [#hcs](#)

6:15



[HealthSocMed | #hcs@HealthSocMed](#)



T1 from recent convo about whether or not HCPs "get it" - understand patients, etc. This Q is about whether it's fair to ask that? [#hcsn](#)

6:15



[Amy Gleason@ThePatientsSide](#)



T1: I think it is fair to say whether HCP gets it or not. As for patients, need education and choices so that they can get it. [#hcsn](#)

6:15

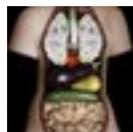


[Ann Becker-Schutte@DrBeckerSchutte](#)



+1 MT [@nickdawson](#) T1: but in general, I think we blame providers/patients as individuals, for what are in fact systems problems. [#hcsn](#) [#hcsn](#)

6:15



[Ron Mills@O2ron](#)



[@nickdawson](#) agree, in general, but we can all think of specific exceptions, lots of 'em. [#hcsn](#)

6:15



[Jennifer Chevinsky@jchevinsky](#)



T1: We encourage HCPs 2 check 2 make sure pt 'gets it' (medical) ..need 2 empower pts to ask and make sure HCPs 'get it' (values) too! [#hcsn](#)

6:15



[Andrew Lopez, RN@nursefriendly](#)



[@nickdawson](#) I'm still confused over the T1 question :(:([#hcsn](#)

6:15



[T2D Research@T2DRemission](#)



[@danamlewis](#) I would expect patients get it more than HCPs, and would welcome managing their health the way they manage their lives. [#hcsn](#)

6:15



[Susannah Fox@SusannahFox](#)



[@myHealthImpact](#) Thanks so much! Happy to hear it's useful. [#hcs](#)

6:16



[P. F. Anderson@pfanderson](#)



[@KazztheSpazz](#) Yum! I made salad dressing tonight w/ sweet kalamata paste & garlic vinegar [#hcs](#)

6:16



[Alan Brewington@abrewi3010](#)



A1 we have to be able to discuss "getting it" on both sides cause its such an individualized opinion. "get it" is a judgement call [#hcs](#)

6:16



[Sameena Aghi@sameena00](#)



[@HealthSocMed](#) completely fair! From pt point of view, I can't even count the times I felt HCP didn't get it, so I was back to square 1 [#hcs](#)

6:16



[Health Meets Tech@myHealthImpact](#)



[@HealthSocMed](#) T11 It seems that both sides can point to "not getting it"; 2-way communication with simple language is best. [#hcs](#)

6:16



[P. F. Anderson@pfanderson](#)



[@Steven_Paul](#) Not so much better ways as MANY ways, and MANY voices! [#hcs](#)

6:16



[Mark Salke@marksalke](#)



A1: You know sales people are trained to probe for understanding, It's a valuable skill. [#hcs](#)

6:16



[Jewels@She_Sugar](#)



[@nickdawson](#) Perhaps but some providers do have a difficult time grasping the day in and day out stresses of chronic illness [#hcs](#)

6:16



[Jennifer Chevinsky@jchevinsky](#)



T1 ultimately its about open dialogue. if we don't question whether we 'get' each other, may never really know if all on same page! [#hcs](#)

6:16



[T2D Research@T2DRemission](#)



[@danamlewis](#) T1 The danger of talking about "getting it" re: tech is probably elitism—even if intentions are democratic/demotic. [#hcs](#)

6:17



[Andrew Lopez, RN@nursefriendly](#)



[@HealthSocMed](#) T1 How can a [#doctor](#) [#nurse](#) [#hcp](#) treat their [#patients](#) properly if they DO NOT understand them? [#hcs](#)

6:17



[Robert Mahoney@mahoneyr](#)



T1 Concept of he/she "just doesn't get it" used a lot but may not be as meaningful as we wish it were. [#hcs](#)

6:17



[Mark Salke@marksalke](#)



Same might be said for medicine. [@T2DRemission](#) [@danamlewis](#) [#hcs](#)

6:17



[Bruce Scott@skipbidder](#)



And for a real answer to [#hcsn](#) T1: I think the majority of time a pt doesn't "get it", it's bc HC team didn't assess & ensure understanding

6:17



[Andrew Lopez, RN@nursefriendly](#)



[@HealthSocMed](#) T1 Do you have a link to the conversation, difficult to put this topic in context :([#hcsn](#)

6:17



[Marie Ennis-O'Connor@JBBC](#)



T1 [@She_Sugar](#) i presented research on HCPS can be learned from patient blogs [#hcsn](#)

6:17



[Nick Dawson@nickdawson](#)



[@She_Sugar](#) I think that's certainly the case. I'd again suggest systems failure - in that case its in training & care delivery design [#HCSM](#)

6:18



[Ann Becker-Schutte@DrBeckerSchutte](#)



MT [@jchevinsky](#) T1: We encourage HCP 2 make sure pt 'gets it' (medical) need 2 empower pts 2make sure HCPs 'get it' (values) too! [#hcsn](#) [#hcsn](#)

6:18



[Carolyn Thomas@HeartSisters](#)



[@nursefriendly](#) Ex. of T1: doc of one of my readers (heart attack) told her "You just have Housewife Syndrome" - he doesn't 'get it' [#hcsn](#)

6:18



[Ron Mills@O2ron](#)



[@skipbidder](#) I've seen "adherence" and "compliance" defined separately: adherence = compliance over time or something like that. [#hcs](#)

6:18



[Laurel Ann Whitlock@twirlandswirl](#)



[@nickdawson](#) Money and access are very real difficulties, too often people are seen as deliberately refusing things out of their reach. [#hcs](#)

6:18



[Jewels@She_Sugar](#)



T1. "Getting it" may be based in the long- term relationship pt/ provider share - if its not working move on. [#hcs](#)

6:18



[Nick Dawson@nickdawson](#)



[@twirlandswirl](#) so so true! [#HCSM](#)

6:18



[Andrew Lopez, RN@nursefriendly](#)



[@HealthSocMed](#) T1 It is absolutely fair to ask that question, it lays the foundation for a [#Therapeutic #Relationship](#). [#hcs](#)

6:18



[Yinka Vidal@YinkaVidal](#)



[#hcs](#) A1 As HCP do we truly have time to listen to our patients with the restrictions of assembly line medicine?

6:18



[Jennifer Chevinsky@jchevinsky](#)



[@AnneCCPA](#) yes, its listening, but also asking right open-ended questions. How do you feel about these options? What is ur 'best case'? [#hcs](#)

6:19



[Dr. Gia Sison@giasison](#)



[@myHealthImpact](#) Hi too super glad to see you! [#hcs](#)

6:19



[Bill Wong@BillWongOT](#)



[@pfanderson](#) agreed... I have this experience first hand as an OT. [#hcs](#) I can relate to some kids well! but awful to others. :(

6:19



[Dr. Gia Sison@giasison](#)



[@nursefriendly](#) Waving hi Andrew! [#hcs](#)

6:19



[Jewels@She_Sugar](#)



[@pfanderson](#) [@HealthSocMed](#) I was just typing a similar response - yes! [#hcs](#)

6:19



[P. F. Anderson@pfanderson](#)



[@nickdawson](#) non-compliance is inaccurate term, creates bias. Really, it means disagreement / inability regarding Tx. [#hcs](#)

6:19



[Ann Becker-Schutte@DrBeckerSchutte](#)



Back to systemRT [@TwiceDiabetes](#) Totally fair to ask if they get it, maybe not to apportion absolute blame to hcps if they don't? [#hcs](#) [#hcs](#)

6:19



[Health Meets Tech@myHealthImpact](#)



@jchevinsky Good point. [#language](#), [#healthliteracy](#) and [#mutual](#) respect are vital. [#hcs](#)

6:19



[Marie Ennis-O'Connor@JBBC](#)



T1 My research on the value of blogs to enhance patient-provider communication ijph.blogs.springer.com/students-den/m...
[#hcs](#)

6:19



[Laurel Ann Whitlock@twirlandswirl](#)



I think people feel threatened when someone tries to clarify, not necessarily attacking the statement, just ensuring understanding. [#hcs](#)

6:19



[Anne Dang, CCPA@AnneCCPA](#)



[@She_Sugar](#) T1 "Getting it" in the pt/provider relationship isn't about obedience-but empowering both parties totake proactive approach [#hcs](#)

6:19



[Bruce Scott@skipbidder](#)



Friendly lurker here to hijack the [#hcs](#) chat. Many of us prefer "adherence" to "compliance" as term

6:19



[Kathleen Poulos@katseyemedia](#)



Content Marketing in Healthcare: A Way to Help Patients Find (and Choose) YOU [#hcs](#) zite.to/19UJUsX

6:20



[Robert Mahoney@mahoneyr](#)



T1 I think it's fair to say a particularly doctor "doesn't get me" but don't know what it means that he or she "doesn't get it".
[#hcs](#)

6:20



[Ann Becker-Schutte@DrBeckerSchutte](#)



Communication critical! RT [@saymybehm](#) T1: Communication between both parties is so crucial to make sure both sides "get it" [#hcs](#) [#hcs](#)

6:20



[Anne Dang, CCPA@AnneCCPA](#)



[@YinkaVidal](#) T1: Scheduling more time or continuing conversation in another appt may be necessary if there are time restrictions [#hcs](#)

6:20



[Renza Scibilia@RenzaS](#)



[@marksalke](#) Thank you. It's been a long time since I joined in! [#hcs](#)

6:20



[TheWomen'sHealthDocs@WomenHealthDocs](#)



[#hcs](#) the doc patient relationship is too paternal pts need more self care

6:21



[Nick Dawson@nickdawson](#)



[@RenzaS](#) hey! Welcome! [#hcs](#)

6:21



[Jewels@She_Sugar](#)



[@BillWongOT](#) [@pfanderson](#) Of course, you can pick your friends, but not your relatives or patients. [#hcs](#)

6:21



[P. F. Anderson@pfanderson](#)



[@nickdawson](#) Atkins, Charles. "Patients Usually Have Reasons for Being Noncompliant." AMA News 2001 44(14). [ama-assn.org/amednews/2001/... #hcs](#)

6:21



[Mark Salke@marksalke](#)



Bam! RT [@katseyemedia](#): Content Marketing in Healthcare: A Way to Help Patients Find (and Choose) YOU [#hcs](#)
[bit.ly/1hcfsTM](#)

6:21



[karina@knzuri](#)



It is imperative to discuss whether HCPs "get it"- 1st step in providing proper care is/should be "getting it" [#hcs](#)

6:21



[Marie Ennis-O'Connor@JBBC](#)



[@RenzaS](#) we meet again ;-) [#hcs](#)

6:21



[Carolyn Thomas@HeartSisters](#)



T1 It's about expectations: docs 'expect' good pts (compliant, engaged) & pts 'expect' docs to be on time, kind, skilled, etc etc [#hcs](#)

6:21



[Renza Scibilia@RenzaS](#)



[@T2DRemission](#) I'm not a fan of adherence OR compliance. I've 'sacked' HCPs for using such terms. [#hcs](#)

6:21



[Alan Brewington@abrewi3010](#)



A1 asking questions leads to curiosity which is where answers come from. [#hcs](#)

6:22



[Nick Dawson@nickdawson](#)



[@WomenHealthDocs](#) great point on self care! Patient autonomy isn't a myth, we all have it, right [@gfry?](#) [#hcs](#)

6:22



[Laurel Ann Whitlock@twirlandswirl](#)



[@TwiceDiabetes](#) Very much so. Also, overweight patients who get the "just lose some weight, it'll take care of itself!" treatment. [#hcs](#)

6:22



[Health Meets Tech@myHealthImpact](#)



[@AnneCCPA](#) [@She_Sugar](#) Liking the [#empowerment](#) aspect AND mutual respect along with understand context help facilitate the approach. [#hcs](#)

6:22



[Renza Scibilia@RenzaS](#)



This is great! RT [@JBBC](#) T1 My research on the value of blogs to enhance patient-provider communication [ijph.blogs.springer.com/students-den/m...](#) [#hcs](#)

6:22



[Nick Dawson@nickdawson](#)



crazy talk! RT [@abrewi3010](#) A1 asking questions leads to curiosity which is where answers come from. [#hcs](#)

6:22



[Faisal Qureshi@fqure](#)



T1 how many HCPs ask pts if they "get it" at end of visit? [#hcs](#)

6:22



[Ann Becker-Schutte@DrBeckerSchutte](#)



MT [@HeartSisters](#) T1 docs 'expect' good pts (compliant, engaged) & pts 'expect' docs to be on time, kind, skilled, etc etc [#hcs](#) [#hcs](#)

6:22



[P. F. Anderson@pfanderson](#)



[@She_Sugar](#) [@BillWongOT](#) "We don't have to like each other to work respectfully together." Riker to Shelby in "Best of Both World" STTNG [#hcs](#)

6:22



[Laurel Ann Whitlock@twirlandswirl](#)



[@TwiceDiabetes](#) Personal least favorite... even when it IS a long-term solution (not always) doesn't help in the now. [#hcs](#)

6:22



[Twice Diabetes@TwiceDiabetes](#)



quite, [@RenzaS](#) as soon as I hear compliance in reln to diabetes I KNOW the hcp doesn't get type 1 diabetes [#hcs](#)

6:22



[Mark Salke@marksalke](#)



[@katseyemedia](#) Kathleen, great point! HC can benefit greatly from a content mktg perspective on pt acquisition. [#hcs](#)

6:22



[Andrew Lopez, RN@nursefriendly](#)



[@WomenHealthDocs](#) Can't rely on [#doctors](#) [#nurses](#) [#hcps](#) to take care of it all these days. Must selfadvocate, [#educate](#). [#hcs](#)

6:23



[T2D Research@T2DRemission](#)



[@She_Sugar](#) [@nickdawson](#) Two useful(?) questions for providers: Could you manage that? Would you accept that? [#hcs](#)

6:23



[Yinka Vidal@YinkaVidal](#)



[@AnneCCPA](#) [#hcs](#) Right! When I'm supposed to see so many patients within a shorter period of time. Tomorrow is another day. Time is money!

6:23



[Ann Becker-Schutte@DrBeckerSchutte](#)



T1: Language matters. "You don't get it" "You are noncompliant"-probably will derail good communication. [#hcs](#)

6:23



[Jennifer Chevinsky@jchevinsky](#)



RT [@nursefriendly](#) [@WomenHealthDocs](#) Cant rely on [#doctors](#) [#nurses](#) [#hcps](#) to take care of it all these days. Must selfadvocate, [#educate](#). [#hcs](#)

6:23



[TheWomen'sHealthDocs@WomenHealthDocs](#)



[@nickdawson](#) [@gfry](#) [#hcs](#) yes doctors should be more passive with an active patient but many pts are too passive with their care

6:23



[Nick Dawson@nickdawson](#)



[@DrBeckerSchutte](#) [@HeartSisters](#) hummm... is it expecting "good" or expecting less friction? [#hcs](#)

6:23



[Jewels@She_Sugar](#)



[@HeartSisters](#) Agree, part of the equation - perhaps we forgo "getting it" for the best provider skills? [#hcs](#)

6:23



[P. F. Anderson@pfanderson](#)



[@TwiceDiabetes](#) Some thing is true for patients w/ low SES whatever.scalzi.com/2005/09/03/bei... Blame the situation, not the patient [#hcsn](#)

6:23



[Alan Brewington@abrewi3010](#)



[@nickdawson](#) I blame [#Medx](#) for my crazy talk :) [#hcsn](#)

6:23



[Ron Mills@O2ron](#)



Seems to me terms like adherence and compliance belong in data analysis, never in conversations with patients. [#hcsn](#)

6:23



[Cherise/LADA@SweeterCherise](#)



Great topic tonight. [#hcsn](#)

6:24



[Bruce Scott@skipbidder](#)



I do very frequently [@fqure](#) Ask-tell-ask approach. Frequently with handwritten note (!) covering main points of what we discussed. [#hcsn](#)

6:24



[Dr. Gia Sison@giasison](#)



T1 Patient-doctor relationships need a solid foundation of trust and collaboration towards "getting it" [#hcsn](#)

6:24



[Carolyn Thomas@HeartSisters](#)



[@JBBC](#) And when our expectations are not met, we accuse the other 'you just don't GET IT!' (Gee, works in marriage too?) [#hcsn](#)

6:24



[T2D Research@T2DRemission](#)



[@twirlandswirl](#) [@nickdawson](#) Bingo! [#hcs](#)

6:24



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) actually for me, I like kids who comply or with little difficulty doing so than kids w/ behavior issues. [#hcs](#)

6:24



[Ann Becker-Schutte@DrBeckerSchutte](#)



[#hcs](#)

6:24



[Mark Salke@marksalke](#)



[@twirlandswirl](#) How it's phrased is so important. Asking how the 'feel' about it may help. Listening to response is imp't too. [#hcs](#)

6:24



[Liza Bernstein@itsthebunk](#)



Speaking of "getting it" - anyone heard [@marcrkatz](#) reveal at [#MedX](#) he now asks ALL his pts "Did I get it?" after LISTENING to his pts [#hcs](#)

6:24



[Dr. Gia Sison@giasison](#)



Yes! RT [@DrBeckerSchutte](#): T1: Language matters. "You don't get it" "You are noncompliant"-probably will derail good communication. [#hcs](#)

6:24



[Mia Behm@saymybehm](#)



[@She_Sugar](#) [@DrBeckerSchutte](#) Very true. Some doctors aren't the best match for certain patients. Make sure you get a PB&J Relationship! [#hcs](#)

6:24



[Twice Diabetes@TwiceDiabetes](#)



[@pfanderson](#) I assure you I am not low SES [#hcs](#)

6:25



[Dana Lewis | #hcs@danamlewis](#)



[@itsthebunk](#) yes - and I love it. [@marcrkatz](#) [#hcs](#)

6:25



[Jewels@She_Sugar](#)



[@SweeterCherise](#) Hey there! [#hcs](#)

6:25



[P. F. Anderson@pfanderson](#)



[@WomenHealthDocs](#) [@nickdawson](#) [@gfry](#) And it makes it easier for the docs in some ways, so the passivity gets positive reinforcement [#hcs](#)

6:25



[Health Meets Tech@myHealthImpact](#)



[@DrBeckerSchutte](#) Exactly my point as well. [#healthliteracy](#) [#language](#) [#context](#) matter to facilitate patient-provider communication. [#hcs](#)

6:25



[David Lee Scher, MD@dlschermd](#)



[@fqure](#) Even educated people 'get it' at end of visit but not by time they get home. Need tools for pts to review and get ?s answered. [#hcs](#)

6:25

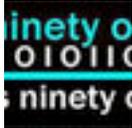


[Yinka Vidal@YinkaVidal](#)



[#hcs](#) A1 "You don't get it," is a way to insult patient, or anybody. How about, "I don't get it! Come again!"

6:25



[Plus91@plus91](#)



[#healthIT](#) [#hcs](#) mHealth - A checkup on consumer use - from rockhealth.com/2013/11/visual...... ow.ly/2BKdhd

6:25



[Marie Ennis-O'Connor@JBBC](#)



[@HeartSisters](#) would make good blog post - or is it a topic you have written about already?? [#hcs](#)

6:25



[Nick Dawson@nickdawson](#)



RT [@itsthebunk](#) Speaking of "getting it"- [@marcratz](#) reveal at [#MedX](#) he now asks ALL his pts "Did I get it?" after LISTENING to his pts [#hcs](#)

6:25



[Rusty Hoe@RustyHoe](#)



[@pfanderson](#) this is a huge issue when I am asked for recommendations [#hcs](#)

6:25



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@nickdawson](#) [@HeartSisters](#) Friction isn't necessarily bad. Can be the reminder to slow down and pay attention. [#hcs](#)

6:25



[P. F. Anderson@pfanderson](#)



[@itsthebunk](#) [@marcrkatz](#) Active listening. "I heard you say X (paraphrase). Is that right?" [#hcsn](#)

6:26



[Alan Brewington@abrewi3010](#)



[@itsthebunk](#) [@marcrkatz](#) I caught that too! Great approach to take with patients. [#hcsn](#)

6:26



[Health Meets Tech@myHealthImpact](#)



“[@giasison](#): T1 Patient-doctor relationships need a solid foundation of trust and collaboration towards "getting it" [#hcsn](#)”
Ditto! [#hcsn](#)

6:26



[Anne Dang, CCPA@AnneCCPA](#)



[@DrBeckerSchutte](#) T1: HCPs should see where pts are first. No use trying to make someone run, if they aren't ready to walk [#hcsn](#)

6:26



[Jewels@She_Sugar](#)



[@WomenHealthDocs](#) [@nickdawson](#) [@gfry](#) We also know appt is limited time - sometimes we talk, others we listen - chronic disease. [#hcsn](#)

6:26



[Laurel Ann Whitlock@twirlandswirl](#)



[@marksalke](#) Feelings are dismissed unjustified too often. Rational or not, feelings are real/uncontrollable, should be treated as such. [#hcsn](#)

6:26



[Andrew Lopez, RN@nursefriendly](#)



[@nickdawson](#) [@WomenHealthDocs](#) [@gfry](#) We all potentially have it Nick. Many have no clue where to start the process :([#hcsn](#)

6:26



[TheWomen'sHealthDocs@WomenHealthDocs](#)



[@saymybehm](#) [#hcs](#) [#austin](#)

6:26



[Marie Ennis-O'Connor@JBBC](#)



T1 seems we are back to the basics of communication with this topic [#hcs](#)

6:26



[Mark Salke@marksalke](#)



A1: Recently my Doc gave me some notes re: result ranges to expect, specialists to consult. I was glad to have 'em. [#hcs](#)

6:26



[P. F. Anderson@pfanderson](#)



[@TwiceDiabetes](#) Never said so. Said same issues are true for patients with low-SES. I grew up on welfare, so aware of the issues [#hcs](#)

6:26



[Anne Dang, CCPA@AnneCCPA](#)



[@DrBeckerSchutte](#) T1: How can an HCP recover if a patient doesn't feel like the HCP "gets it"? [#hcs](#)

6:27



[Ann Becker-Schutte@DrBeckerSchutte](#)



MT [@twirlandswir](#) Feelings are dismissed unjustified too often. Rational or not, feelings are real should be treated as such. [#hcs](#) [#hcs](#)

6:27



[Liza Bernstein@itsthebunk](#)



Yes & to give pt space to add info RT [@pfanderson](#): [@marcrkatz](#) Active listening. "I heard you say X (paraphrase). Is that right?" [#hcs](#)

6:27



[Nick Dawson@nickdawson](#)



good. RT [@tomcampbellrva](#) ill trot out a fav quote: "It takes at least two people to not cooperate." -Bill Miller, MI Developer [#hcs](#)

6:27



[P. F. Anderson@pfanderson](#)



[@RustyHoe](#) I always tell people recommending a doctor is very personal matter [#hcs](#)

6:27



[Liza Bernstein@itshebunk](#)



RT [@abrewi3010](#): [@itshebunk](#) [@marcrkatz](#) I caught that too! Great approach to take with patients. [#hcs](#)

6:27



[Steven Incontrera@Steven_Paul](#)



[@nursefriendly](#) [@TwiceDiabetes](#) Agreed [@westr](#) could do 45 mins on this topic alone. [#HCSM](#)

6:27



[Carolyn Thomas@HeartSisters](#)



[@nickdawson](#) Def of Good Patient: get sick, see doctor, take meds, get better, thank brilliant doctor [@DrBeckerSchutte](#) [#hcs](#)

6:27



[Ron Mills@O2ron](#)



Yes. Let's don't let good manners create bad medicine. MT [@DrBeckerSchutte](#) [@nickdawson](#) [@HeartSisters](#) Friction isn't necessarily bad. [#hcs](#)

6:27



[Ann Becker-Schutte@DrBeckerSchutte](#)



RT [@AnneCCPA](#) T1: HCPs should see where pts are first. No use trying to make someone run, if they aren't ready to walk [#hcs](#) [#hcs](#)

6:27



[Dr. Gia Sison@giasison](#)



Active listening, patient participation and empathy works towards "getting it" [#hcs](#)

6:27



[HealthSocMed | #hcs@HealthSocMed](#)



(One of many [#hcs](#) things I'm thankful for is how respectful everyone is of each other, no matter the topic. Moving on to T2 shortly!)

6:27



[Bill Wong@BillWongOT](#)



[@O2ron](#) compliance was discussed in my psych visits- checking up on whether I took the medication he suggested. [#hcs](#)

6:27



[Ann Becker-Schutte@DrBeckerSchutte](#)



RT [@AnneCCPA](#) [@DrBeckerSchutte](#) T1: How can an HCP recover if a patient doesn't feel like the HCP "gets it"? [#hcs](#)

6:27



[Yinka Vidal@YinkaVidal](#)



[@nickdawson](#) [@itsthebunk](#) [@marckratz](#) [#hcs](#) You're right Listening skill takes some practice. Many schools don't teach this in med training

6:28



[Faisal Qureshi@fquire](#)



T1 "I do..Ask-tell-ask approach" [#hcs](#) [@skipbidder](#)" Hope you're not the exception. I usually hv 2 ask my HCP to summarize

6:28



[P. F. Anderson@pfanderson](#)



[@nursefriendly](#) [@TwiceDiabetes](#) Agreed. Same issues appear in many contexts. [#hcs](#)

6:28



[Robert Dunne@Academy911](#)



[@giasison](#) they also often need more time than the [#ManagedCare](#) reimbursement schedule will deems economically feasible [#HCSM](#) Just sayin

6:28



[Jewels@She_Sugar](#)



[@jchevinsky](#) open ended questions, eye contact, speaking "we" are in this together, nocomputer eyes - simple things are huge! [#hcs](#)

6:28



[Andrew Lopez, RN@nursefriendly](#)



[@fquire](#) How many [#patients](#) "nod their heads" in agreement when in fact that are totally lost? [#hcs](#) (too many)

6:28



[Steven Incontrera@Steven_Paul](#)



[@JBBC](#) yeah following a twitter feed seems like a huge jump when they're not even talking in the office. [#HCSM](#)

6:28



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@AnneCCPA](#) Being humble and owing that we missed a cue is a good start. Erasing expectation of perfection/willing to grow. [#hcs](#)

6:28



[Andrew Lopez, RN@nursefriendly](#)



[@nickdawson](#) [@WomenHealthDocs](#) [@gfry](#) It is quality, [#patient](#) [#autonomy](#), [#empowerment](#) [#advocacy](#) we need to foster. [#hcsn](#)

6:28



[Bill Wong@BillWongOT](#)



[@twirlandswirl](#) I think it has to do with appt time, too. My OT appt's are 1 hr, plenty of time to talk about feelings. [#hcsn](#)

6:28



[Marie Ennis-O'Connor@JBBC](#)



[@Steven_Paul](#) true that! [#hcsn](#)

6:29



[Liza Bernstein@itsthebunk](#)



MT [@YinkaVidal](#): [@nickdawson](#) [@itsthebunk](#) [@marckratz](#) You're right. Listening skill takes practice. Many med schools don't teach this [#hcsn](#)

6:29



[Jennifer Chevinsky@jchevinsky](#)



[@AnneCCPA](#) [@DrBeckerSchutte](#) HCP shld take step back, find out what aren't getting & why? Often recoverable if willing 2 show [#humility](#) [#hcsn](#)

6:29

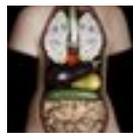


[Marie Ennis-O'Connor@JBBC](#)



RT [@tomcampbellrva](#) ill trot out a fav quote: "It takes at least two people to not cooperate." -Bill Miller, MI Developer [#hcsn](#)

6:29



[Ron Mills@O2ron](#)



[@BillWongOT](#) sure strikes me as a useless word in such a case. [#hcs](#)

6:29



[Ann Becker-Schutte@DrBeckerSchutte](#)



Yes, yes and very much yes!! RT [@giasison](#) Active listening, patient participation and empathy works towards "getting it" [#hcs](#) [#hcs](#)

6:29



[Jewels@She_Sugar](#)



Putting on a gown and seeing it from a patient perspective is a game changer [#hcs](#)

6:29



[Amy Gleason@ThePatientsSide](#)



I wish there was a way to make healthcare more science based so that so much isn't left to personal bias [#hcs](#)

6:29



[P. F. Anderson@pfanderson](#)



[@TwiceDiabetes](#) Hmm. I suspect what you are trying to say & what I'm trying to say can't be disentangled in 140 :) [#hcs](#)

6:29



[HealthSocMed | #hcs@HealthSocMed](#)



TOPIC 2 - Does SM encourage competition among HCPs? Pros/cons to this? Does the competition result in improved quality and/or care? [#hcs](#)

6:30



[Dana Lewis | #hcs@danamlewis](#)



T2 live at [#hcs](#) - Does SM encourage competition among HCPs? Pros/Cons to this? Does competition result in improved quality and/or care?

6:30



[Jewels@She_Sugar](#)



True! RT [@JBBC](#) [@tomcampbellrva](#) ill trot out a fav quote: "It takes at least two people to not cooperate." -Bill Miller, MI Developer [#hcs](#)

6:30



[Henry Woo@DrHWoo](#)



Superb guide for conference tweeting [#hcsmanz](#) [#hcs](#) RT [@amsaunders3000](#): Endorsed guidelines? [@DrHWoo](#) [@declangmurphy](#) [pic.twitter.com/7C0JKZ2yV3](#)

6:30



[P. F. Anderson@pfanderson](#)



[@RustyHoe](#) Especially true for folk in rural areas, with limited insurance plan. I know of a plan only has ONE oncologist, ONE psych! [#hcs](#)

6:30



[Marie Ennis-O'Connor@JBBC](#)



Very interesting qs - looking forward to hearing the ans to this one! TOPIC 2 - Does SM encourage competition among HCPs? [#hcs](#)

6:30



[Health Meets Tech@myHealthImpact](#)



Remember a holistic approach to include family in the patient-provider communication process and relationship. [#hcs](#)

6:31



[Twice Diabetes@TwiceDiabetes](#)



[@pfanderson](#) Possibly, I do find the 140 limitation extremely frustrating [#hcs](#)

6:31



[Robert Mahoney@mahoneyr](#)



Not just about listening, though. Clinical medicine often rewards fast answers, which sometimes leads to only hearing 1/2 the story. [#hcsn](#)

6:31



[T2D Research@T2DRemission](#)



[@twirlandswirl](#) [@TwiceDiabetes](#) "Just" anything is bad for HCPs to use with pts. Nothing is simple when u r sick, let alone chronic. [#hcsn](#)

6:31



[Aurelia Cotta@AureliaCotta](#)



[@nursefriendly](#) [@fqure](#) how many patients just nod because they want to leave and have given up? (Lots) [#hcsn](#)

6:31



[Faisal Qureshi@fqure](#)



T1 [@dlschermd](#) there was a startup that addressed this exact prob of pt retention via video noted but now out of biz [#hcsn](#)

6:31



[P. F. Anderson@pfanderson](#)



[@HealthSocMed](#) I have a new theory on this. If you want business as usual, [#hcsn](#) not for you. Want to change the world? Then, welcome.

6:31



[Dr. Gia Sison@giasison](#)



T2 Soc med for me furthers collaboration in a diversified field of healthcare peers not gearing towards competition [#hcsn](#)

6:31



[johnmoehrke@johnmoehrke](#)



A2 - No, SM for [#healthcare](#) is not ubiquitous enough to make a change. Just the tech elite. Doesn't mean it is bad, just not enough. [#HCSM](#)

6:31



[Bill Wong@BillWongOT](#)



[@O2ron](#) in this case is useless... I sometimes use my knowledge as an OT to override what my psych guy says. [#hcsn](#)

6:31



[Laurel Ann Whitlock@twirlandswirl](#)



[@T2DRemission](#) [@TwiceDiabetes](#) And yet, there it is. [#hcsn](#)

6:32



[Jewels@She_Sugar](#)



T2. Most providers I know are very disconnected from SM with their professional lives [#hcsn](#)

6:32



[Twice Diabetes@TwiceDiabetes](#)



THIS RT [@AureliaCotta](#) [@nursefriendly](#) [@fqure](#) how many patients just nod because they want to leave and have given up? (Lots) [#hcsn](#)

6:32



[Liza Bernstein@itsthebunk](#)



[@WomenHealthDocs](#) IMO It's not about docs being passive with active patients at all -- it's about being open to collaborate w pt [#hcsn](#)

6:32



[Alan Brewington@abrewi3010](#)



A2 I think SM encourages competition among patients but not HCP. Patients now seem more engaged and not "victimized" as much. [#hcsn](#)

6:32



[Nick Dawson@nickdawson](#)



[@nursefriendly](#) 80% of care is self care, thats participatory. But it doesn't make the journals, sadly. [@WomenHealthDocs](#)
[@gfry](#) #HCSM

6:32



[Heather Z@ZHeatherChamp](#)



[@HealthSocMed](#) A2: you bet it's fair to ask them! My docs don't know any about Cowden's Syndrome but they best wanna know! #hcsm #raredisease

6:32



[Yinka Vidal@YinkaVidal](#)



[@YinkaVidal](#) #hcsm She didn't check into hospital as a physician. She checked in as a patient ready to deliver a baby. Later I understood.

6:32



[Carolyn Thomas@HeartSisters](#)



[@She_Sugar](#) You are SO right. Nothing like feeling sick, wearing gown, pushing unanswered call bells to grow empathy for pts #hcsm

6:32



[Andrew Lopez, RN@nursefriendly](#)



[@HealthSocMed](#) T2 No, not at this point. You'll have the early adopters who are in completion. Not the mainstream.
#hcsm

6:32



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) Very true. Means clutching at straws to fit hypothesis. That's why I went 20 years w/ series of wrong diagnoses.
#hcsm

6:32



[Steven Incontrera@Steven_Paul](#)



T1: Yes! I play the middleman in a lot of these conversations hospitals are always asking about one another what platforms to use etc. [#HCSM](#)

6:32



[T2D Research@T2DRemission](#)



[@twirlandswirl](#) [@TwiceDiabetes](#) Also, "lose weight" not an action. Move more, eat more vegetables: actions. [#hcsn](#)

6:32



[Jennifer Chevinsky@jchevinsky](#)



[@She_Sugar](#) so tru! ..altho [#EMR](#) great 4 record keeping, staring at computer throughout clinic visit can be awful for pt-relationship! [#hcsn](#)

6:32



[Ann Becker-Schutte@DrBeckerSchutte](#)



RT [@giasison](#) T2 Soc med for me furthers collaboration in a diversified field of healthcare peers not gearing towards competition [#hcsn](#) [#hcsn](#)

6:32



[Bill Wong@BillWongOT](#)



[@twirlandswirl](#) well... Mine is the case because they are outpatient MH visits. So feelings are important! [#hcsn](#)

6:32



[Rusty Hoe@RustyHoe](#)



[@pfanderson](#) YES how can you have choice or empowerment when the choice is nonexistent [#hcsn](#)

6:32



[Dr. Gia Sison@giasison](#)



[@Academy911](#) Vital point here Robert [#hcsn](#)

6:32



[Nick Dawson@nickdawson](#)



[@abrewi3010](#) interesting thought. Do you mean it encourages patients to vet, evaluate and 'shop' for providers? [#HCSM](#)

6:33



[Andrew Lopez, RN@nursefriendly](#)



T2 Until [#SocialMedia](#) is fully adopted and integrated into [#marketing](#) [#publicrelations](#), no serious competitions. [#hcsn](#)

6:33



[Marie Ennis-O'Connor@JBBC](#)



[@abrewi3010](#) am inclined to agree with you on that [#hcsn](#)

6:33



[Mia Behm@saymybehm](#)



[@HealthSocMed](#) Great Q! SO beneficial. HCPs have to strive to be at the top of their game and really figure out what's best for the pt [#hcsn](#)

6:33



[Renza Scibilia@RenzaS](#)



T2 Here in Australia there are so few HCPs using SM that there is very limited consideration of its impact. [#hcsn](#)

6:33



[Jewels@She_Sugar](#)



[@HeartSisters](#) So true. I'm a patient and provider- I know it helps with pt. empathy [#hcsn](#)

6:33



[Rusty Hoe@RustyHoe](#)



[@RenzaS](#) [@twirlandswirl](#) Same. Took a long time, but my team now is great. They even read my blog! [#hcs](#)

6:33



[Mark Salke@marksalke](#)



A2: Perhaps not yet, actively anyway. But I think it will influence how patients choose HCPs in the future. [#hcs](#)

6:33



[Ron Mills@O2ron](#)



T2: Yes, SM fuels competition among HCPs. But not all do/will participate or engage. Listening/Observing is also competing. [#hcs](#)

6:33



[Twice Diabetes@TwiceDiabetes](#)



Same with lower your a1c [@T2DRemission](#) [@twirlandswirl](#) [@TwiceDiabetes](#) Also, "lose weight" not an action. actions. [#hcs](#)

6:33



[Robert Mahoney@mahoneyr](#)



Making the right diagnosis is hard. Takes too long. Sometimes involves saying, "I don't know. Yet." [@pfanderson](#) [#hcs](#)

6:34



[Andrew Lopez, RN@nursefriendly](#)



T2 The fastest developing areas of [#competition](#) in [#healthcare](#) arenas, will be [#hospitals](#) [#healthcare](#) facilities, not [#hcps](#). [#hcs](#)

6:34



[Liza Bernstein@itsthebunk](#)



RT [@DrBeckerSchutte](#): RT [@giasison](#) T2 Soc med for me furthers collab in diversified field of HC peers not gearing towards competition [#hcs](#)

6:34



[Laurel Ann Whitlock@twirlandswirl](#)



[@DrBeckerSchutte](#) It's sad and scary, my last few experiences have left me feeling me and my health (mental/physical) just don't matter [#hcsn](#)

6:34



[Marie Ennis-O'Connor@JBBC](#)



[@RenzaS](#) it is similar in Europe [#hcsn](#)

6:34



[Bill Wong@BillWongOT](#)



[@DrBeckerSchutte](#) I agree. For me, I have to do it in a way that is also professional (since having AS means I am prone to miss cues) [#hcsn](#)

6:34



[Jewels@She_Sugar](#)



[@dlschermd](#) [@SweeterCherise](#) Yes, me too and I parent to it. I love peds med because of it. You have a unique looking glass [#hcsn](#)

6:34



[Twice Diabetes@TwiceDiabetes](#)



So long as their is shortage of HCPs competition remains very limited [#hcsn](#)

6:34



[Andrew Lopez, RN@nursefriendly](#)



T2 [#hospitals](#) are painfully aware that [#consumers](#) are online, want desperately to reach them, retain their market shares. [#hcsn](#)

6:34



[Alan Brewington@abrewi3010](#)



A2 I think the competition among patients is a great thing. We push each other bc we can relate better with our patient community [#hcsn](#)

6:35



[Health Meets Tech@myHealthImpact](#)



[@nursefriendly](#) Yeah, leaders in [#SocialMedia](#) are few, and laggards are many. [#hcsn](#)

6:35



[P. F. Anderson@pfanderson](#)



[@TwiceDiabetes](#) When conversations go outside Twitter, I usually find folk are in agreement, just using same words to mean diff things [#hcsn](#)

6:35



[Dr. Omudhome Ogbru@DrOgbru](#)



How are [#pharmacy](#) students using social media? [ow.ly/r2QrI](#) [#hcsn](#)

6:35



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) I know some peers from LinkedIn who don't use FB or Twitter for professional purposes. [#hcsn](#)

6:35



[Renza Scibilia@RenzaS](#)



[@RustyHoe](#) [@twirlandswirl](#) Ha! As do mine - and recommend it to other patients. It's a huge compliment - but makes me feel they 'get it' [#HCSM](#)

6:35



[Andrew Lopez, RN@nursefriendly](#)



T2 [#hospitals](#) are aware as well, that [#consumers](#) expect and will demand [#SocialMedia](#) access to [#healthcare](#) providers. [#hcsn](#)

6:35



[Ann Becker-Schutte@DrBeckerSchutte](#)



T2: I view social media as a space where I can connect to/learn from other HCPs--not forum for competition. [#hcs](#)

6:35



[Laurel Ann Whitlock@twirlandswirl](#)



And I've gotten "well, if you won't do this, I can't help you." Long for "well, let's explore other options," too vulnerable to ask. [#hcs](#)

6:35



[Robert Mahoney@mahoneyr](#)



T2 I don't know if [#hcs](#) makes me a better doctor but not knowing anything about it would definitely make me a worse one.

6:35



[Rasu Shrestha MD MBA@RasuShrestha](#)



[#HCSM](#) In this age of consumer empowerment, PCPs ought to leverage social media as a strategic imperative T2

6:35



[Cherise/LADA@SweeterCherise](#)



T2. As a PT, I love reading blogs about Endo appointments. Reading others experiences has helped me find my perfect partner (Endo). [#hcs](#)

6:35



[Mark Salke@marksalke](#)



[@nursefriendly](#) Interesting, Andrew, there is so much lowing hanging mktg fruit out there to be picked. [#hcs](#)

6:36



[Faisal Qureshi@fqure](#)



T1 [@TwiceDiabetes](#) [@AureliaCotta](#) [@nursefriendly](#) "how many patients just nod given up?" PCP duty to recognize signs of pt despair? [#hcsn](#)

6:36



[Rusty Hoe@RustyHoe](#)



T2 Those already engaged in SM most likely to understand need to improve/competition etc, but many still not engaged online [#hcsn](#)

6:36



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) Doctor I used have used to say that. :) Doctor I have now also says that. It's my touchstone for a good doc, saying IDK,Y [#hcsn](#)

6:36



[Steven Incontrera@Steven_Paul](#)



T2: Hospitals are competing for patients and have ventured into SM to find them. [#HCSM](#)

6:36



[Andrew Lopez, RN@nursefriendly](#)



T2 If more patients complain, start reporting in forums on quality issues, yes. We're not there yet on a wide scale. [#hcsn](#)

6:36



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) i understand about FB- since friend request bans can be crippling for HCP's who DO wish to network with peers! [#hcsn](#)

6:36



[Health Meets Tech@myHealthImpact](#)



[@marksalke](#) This will influence how patients, families and social networks choose HCPs in the future. [#hcsn](#)

6:36



[Clay Chappell, MD@CChappellMD](#)



[@HealthSocMed](#) A2 Competition will be present whether SM is used or not. Some may feel need a SM presence to keep up with a competitor. [#hcsmd](#)

6:37



[Mark Salke@marksalke](#)



Bravo! MT [@mahoneyr](#): T2 I don't know [#hcsmd](#) makes me a better doctor but not knowing anything about it would definitely make me a worse one.

6:37



[Jewels@She_Sugar](#)



Yes-->MT [@mahoneyr](#) I don't know if [#hcsmd](#) makes me a better doc but not knowing anything about it would definitely make me a worse one. [#hcsmd](#)

6:37



[Natalia Shche, Ph.D.@creativepharma](#)



T2 : it may though, e.g. if I lived in NH, I would select [@kevinmd](#) as my PCP if he accepts pts instead of any other, eyes closed [#hcsmd](#)

6:37



[Ron Mills@O2ron](#)



[@nickdawson](#) [@DrBeckerSchutte](#) [@HeartSisters](#) ah, duly noted, Nick. [#hcsmd](#)

6:37



[Steven Incontrera@Steven_Paul](#)



[@marksalke](#) [@nursefriendly](#) that's why they make [@vineapp](#) videos of brain surgeries. [#HCSMD](#)

6:37



[Rusty Hoe@RustyHoe](#)



[@RenzaS @twirlandswirl](#) Mine too. That they see value in my sharing of my experience is very validating. [#hcs](#)

6:37



[Jewels@She_Sugar](#)



[@BillWongOT](#) Fine line between the two [#hcs](#)

6:38



[Marie Ennis-O'Connor@JBBC](#)



to answer T2 think it comes down to the reason why you engage with social media [#hcs](#)

:38



[Robert Mahoney@mahoneyr](#)



Takes a lot of self-confidence to know that it's ok to admit you don't know the answer (yet). [@pfanderson #hcs](#)

6:38



[Jennifer Chevinsky@jchevinsky](#)



T2: There's healthy competition- drives HCPs 2 b best 4 patients. Then there's cut-throat neg competition- no longer about the patient. [#hcs](#)

6:38



[Aurelia Cotta@AureliaCotta](#)



[@mahoneyr @pfanderson #hcs](#) I hear that said too often. Sometimes, a previous doctor made a mistake. No one ever wants to say that.

6:38



[Carolyn Thomas@HeartSisters](#)



[@abrewi3010](#) Patients "pushing" each other in competition is "great"? Yikes... I must be misunderstanding you [#hcs](#)

6:38



[Marie Ennis-O'Connor@JBBC](#)



T2 if you want to learn from and engage in discussions with pts and peers shouldn't be competitive [#hcsn](#)

6:38



[Jewels@She_Sugar](#)



[@dlschermd](#) [@SweeterCherise](#) I don't receive that from my or my child's providers - good relationships, appreciate my knowledge/ care [#hcsn](#)

6:39



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@nickdawson](#) [@O2ron](#) [@HeartSisters](#) Got it--and that's how easy it is to miss the cue. If we are okay not being perfect, room to fix. [#hcsn](#)

6:39



[Yinka Vidal@YinkaVidal](#)



[#hcsn](#) A2: Competition in healthcare may not necessarily be a good thing if patients don't know to evaluate service. Cosmetic or quality?

6:39



[Cherise/LADA@SweeterCherise](#)



[@dlschermd](#) [@She_Sugar](#) True and very said. I wish there was a happy medium. [#hcsn](#)

6:39



[Mark Salke@marksalke](#)



RT [@marksalke](#): Steven someone earlier mentioned content mktg. That segment is wide open in HC. Steven_Paul [@nursefriendly](#) [@vineapp](#) [#hcsn](#)

6:39



[Renza Scibilia@RenzaS](#)



Right. Collaborative! RT [@JBBC](#) T2 if you want to learn from and engage in discussions with pts and peers shouldn't be competitive [#hcsn](#)

6:39



[Rusty Hoe@RustyHoe](#)



[@JBBC](#) I think it's still a huge learning curve for man. Often it is more a token engagement rather than truly comprehending the medium [#hcsn](#)

6:39



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) yes... FB jail is annoying for those who know that they are doing constructive networking but got lots of declines. [#hcsn](#)

6:39



[Health Meets Tech@myHealthImpact](#)



[@DrBeckerSchutte](#) Key point! What do you learn most from [#SocialMedia](#)? [#hcsn](#)

6:39



[Alan Brewington@abrewi3010](#)



[@nickdawson](#) I compete with [@HurtBlogger](#) bc I want to have the same success she has for example. Without SM I wouldn't have meet her. [#hcsn](#)

6:40



[Aurelia Cotta@AureliaCotta](#)



[@fqire](#) [@TwiceDiabetes](#) [@nursefriendly](#) [#hcsn](#) T2 sometimes previous HCP is source of despair. It helps for current HCP to validate that

6:40



[Ann Becker-Schutte@DrBeckerSchutte](#)



MT [@jchevinsky](#) T2: Theres healthy competition-drives HCPs 2 b best 4 patients. Then cut-throat neg competition-no

longer re: patient. [#hcs](#)

6:40



[Laurel Ann Whitlock@twirlandswirl](#)



(I'm very cynical tonight. Sorry about that.) [#hcs](#)

6:40



[Marie Ennis-O'Connor@JBBC](#)



T2 [@abrewi3010](#) is there competition between patients? think of it is more collaborative model of learning and support [#hcs](#)

6:40



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) I like to do that in my profession, too. Don't want to mislead folk, so must say IDK YET. Esp in presentations. Cd bite U [#hcs](#)

6:40



[Plus91@plus91](#)



Top Three Annoying Things [#EHR](#) Vendors Do To Sell [ow.ly/qWTNf](#) [#hcs](#) [#hcsmin](#)

6:40



[Ron Mills@O2ron](#)



[@twirlandswirl](#) don't go changing... [#hcs](#)

6:40



[Plus91@plus91](#)



Top Three Annoying Things [#EHR](#) Vendors Do To Sell [shrd.by/2p76K8](#) [#hcs](#) [#hcsmin](#)

6:40



[Jewels@She_Sugar](#)



[@dlschermid](#) [@SweeterCherise](#) Also, view me as a PIA then or helicopter mom but my child is in good hands at doc and at home (-: [#hcsmd](#)

6:40



[Bill Wong@BillWongOT](#)



[@JBBC](#) that said, there is a fine line when u join online support groups as an HCP. [#hcsmd](#) u gotta be careful about what you post.

6:40



[Marie Ennis-O'Connor@JBBC](#)



T2 wonder if we all mean the same thing by competition in this context?? [#hcsmd](#)

6:40



[Robert Mahoney@mahoneyr](#)



I don't know if the last doc made a mistake. I just know I might've done it differently. Big distinction. [@AureliaCotta](#) [@pfanderson](#) [#hcsmd](#)

6:41



[Andrew Lopez, RN@nursefriendly](#)



[@Steven_Paul](#) [@TwiceDiabetes](#) [@westr](#) It's a long-standing problem and difficult to address. [#hcsmd](#)

6:41



[Carolyn Thomas@HeartSisters](#)



[@mahoneyr](#) YES! My cardiologist once told me: "Not sure, but I'll find out and we'll figure this out together" [@pfanderson](#) [#hcsmd](#)

6:41



[Marie Ennis-O'Connor@JBBC](#)



[@RustyHoe](#) so true! [#hcsmd](#)

6:41



[Rusty Hoe@RustyHoe](#)



[@twirlandswirl](#) [@marksalke](#) True They are part of the presentation and will impact on issues like compliance and in turn health outcomes [#hcsn](#)

6:41



[Rasu Shrestha MD MBA@RasuShrestha](#)



It is critical for social media to be actionable and relevant, not just noise. Make it happen, a tweet at a time. [#HCSM](#) T2

6:41



[Nick Dawson@nickdawson](#)



[@abrewi3010](#) ahhh interesting thought - competition for attention for patient-centered ideas. entrepreneurial ePatients!
[@HurtBlogger](#) [#HCSM](#)

6:41



[P. F. Anderson@pfanderson](#)



[@AureliaCotta](#) [@mahoneyr](#) Actually, wd undermine my trust of current doc if the 1st thing they sd was "someone else made a mistake" [#hcsn](#)

6:41



[Cherise/LADA@SweeterCherise](#)



[@She_Sugar](#) [@dlschermid](#) Jewels-same here. My Endo loves questions and always starts his sentences "How can WE fix this..." [#hcsn](#)

6:41



[Liza Bernstein@itsthebunk](#)



re HCPs & Patients using SoMe, see this panel I moderated at [#MedX](#) w [@DrBeckerSchutte](#) & DrAttai - youtu.be/AsZOpk2qSc8 [#hcsn](#)

6:41



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@myHealthImpact](#) I learn more about the practical experiences w/illness that my pts deal with. Educates me. [#hcs](#)

6:41



[Ann Becker-Schutte@DrBeckerSchutte](#)



Back to T1: I remind my clients regularly to correct me if I got it wrong. And I ask. A lot. [#hcs](#)

6:41



[David Lee Scher, MD@dlscherm](#)



[@She_Sugar](#) [@SweeterCherise](#) Hopefully a situation to come for all. [#hcs](#)

6:42



[Andrew Lopez, RN@nursefriendly](#)



[@AureliaCotta](#) [@fqure](#) Not a good situation when their [#health](#) depends on what happens after they leave :([#hcs](#)

6:42



[HealthSocMed | #hcs@HealthSocMed](#)



[@DaraDrake8](#) remember to include the hashtag in your tweets so others will see them! [#hcs](#)

6:42



[Mark Salke@marksalke](#)



A2: Re: competition. It's a business HC systems and individual HCPs are running. Competition is inevitable. SM is a differentiator. [#hcs](#)

6:42



[David Lee Scher, MD@dlscherm](#)



[@She_Sugar](#) [@SweeterCherise](#) I'm viewed more of a Drone than helicopter. [#hcsn](#)

6:42



[T2D Research@T2DRemission](#)



[@AnneCCPA](#) [@DrBeckerSchutte](#) [@DavidSperoRN](#) tells utterly inspiring story about pt who couldn't make it back if she walked to her mailbox [#hcsn](#)

6:42



[Jennifer Chevinsky@jchevinsky](#)



SoMe brings forth competition vs collaboration. transparency vs shaming. patient-centered vs profit-centered. need 2 check our motives [#hcsn](#)

6:43



[Marie Ennis-O'Connor@JBBC](#)



[@DrBeckerSchutte](#) yes! this is what it should be about - learning from each other and co-creating better health [#hcsn](#)

6:43



[Liza Bernstein@itsthebunk](#)



This is what makes me [#Respect](#) a Doc MT [@DrBeckerSchutte](#) I remind my clients regularly 2correct me if I got it wrong. And I ask. A lot [#hcsn](#)

6:43



[Alan Brewington@abrewi3010](#)



[@HeartSisters](#) I think by pushing each other we remember to live life we were healthy. It's a friendly push. [#hcsn](#)

6:43



[Steven Incontrera@Steven_Paul](#)



[@nickdawson](#) [@abrewi3010](#) [@HurtBlogger](#) yep [@rawarrior](#) too [#HCSM](#)

6:43



[Andrew Lopez, RN@nursefriendly](#)



[@nickdawson](#) [@WomenHealthDocs](#) [@gfry](#) 80% selfcare, if they [#patients](#) have learned "how to" and see the value of it. [#hcsn](#)

6:43



[Jewels@She_Sugar](#)



[@HeartSisters](#) [@mahoneyr](#) [@pfanderson](#) The 'we' 'together' verbage is priceless,bring it to the table + you will be a well loved provider [#hcsn](#)

6:43



[P. F. Anderson@pfanderson](#)



[@JBBC](#) [@abrewi3010](#) Designing for Care bk talks about thinking of healthcare as centered outside hospital/clinic, in patients control [#hcsn](#)

6:43



[Health Meets Tech@myHealthImpact](#)



[@DrBeckerSchutte](#) [#SocialMedia](#) helps u to learn practical context of patient illnesses, but where do u get this from those not online? [#hcsn](#)

6:43



[Yinka Vidal@YinkaVidal](#)



[@pfanderson](#) [@AureliaCotta](#) [@mahoneyr](#) [#hcsn](#) had to deal with this many times when some healthcare professionals try to cover their mistakes.

6:43



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) yes... But I enjoy a regular profile because I can keep track of who is my friend and such. [#hcsn](#)

6:44



[Robert Mahoney@mahoneyr](#)



I almost never know enough abt circumstances to be able to say for sure what last doc did was a "mistake". [@pfanderson](#) [@AureliaCotta](#) [#hcs](#)

6:44



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@pfanderson](#) [@mahoneyr](#) Except that admitting we don't know all the answers is how we build toward best treatment. [#hcs](#)

6:44



[David Lee Scher, MD@dlschermd](#)



[@SweeterCherise](#) [@She_Sugar](#) Excellent. I always start encounter with 'How are you feeling?' [#hcs](#)

6:44



[Andrew Lopez, RN@nursefriendly](#)



[@nickdawson](#) [@WomenHealthDocs](#) [@gfry](#) Most of us know what to do to lose weight, improve [#lifestyles](#), but many still don't. [#hcs](#)

6:44



[Marie Ennis-O'Connor@JBBC](#)



[@pfanderson](#) that's interesting - thanks for sharing [#hcs](#)

6:44

6:44



[P. F. Anderson@pfanderson](#)



[@AureliaCotta](#) [@mahoneyr](#) 1 doc said, "They did a great workup. There is only 1 more thing I want to check" [#hcs](#)

6:44



[Jewels@She_Sugar](#)



[@dlschermd](#) [@SweeterCherise](#) Perfect, so smart- room to talk and shows you care. [#hcs](#)

6:45



[Alicia C. Staley@stales](#)



want! RT [@nickdawson](#): [@abrewi3010](#) - competition for attention for patient-centered ideas. entrepreneurial ePatients!
[@HurtBlogger](#) [#HCSM](#)

6:45



[Alan Brewington@abrewi3010](#)



[@JBBC](#) I would call it collaborative competition. We are helping each other push our limits in a healthy way [#hcs](#)

6:45



[Steven Incontrera@Steven_Paul](#)



[@AnneCCPA](#) [@HealthSocMed](#) "Healthcare is slow" says your manila patient record folder [#HCSM](#)

6:45



[HealthSocMed | #hcs@HealthSocMed](#)



Moving on to our final topic (T3) for the evening! [#hcs](#)

6:45



[Jewels@She_Sugar](#)



[@BillWongOT](#) you can have personal and professional [#hcs](#)

6:45



[Liza Bernstein@itsthebunk](#)



YES!! RT [@abrewi3010](#): [@JBBC](#) I would call it collaborative competition. We are helping each other push our limits in a healthy way [#hcs](#)

6:45



[Andrew Lopez, RN@nursefriendly](#)



[@myHealthImpact](#) Lots of individuals doing great things out here :) [#hcs](#)[m](#) [#doctorstofollow](#) [#nursestofollow](#) :)

6:45



[Anne Dang, CCPA@AnneCCPA](#)



[@nursefriendly](#) T2: Can use social media to incorporate healthy habits by having patients compete with themselves (eg weight loss) [#hcs](#)[m](#)

6:45



[Health Meets Tech@myHealthImpact](#)



[@DrBeckerSchutte](#) [@pfanderson](#) [@mahoneyr](#) Ann, Digging your tweets. [#honest](#) [#transparent](#) [#mutual](#) learning [#hcs](#)[m](#)

6:45



[Renza Scibilia@RenzaS](#)



[@She_Sugar](#) So frequently, the question 'so.....how are you' is asked as you are walking out the door to pay! [#hcs](#)[m](#)

6:45



[Nick Dawson@nickdawson](#)



[@mahoneyr](#) as Bridget Duffy from Experia says, most of us cannot gauge quality of care, but all can gauge how we are treated [#hcs](#)[m](#)

6:45



[Yinka Vidal@YinkaVidal](#)



[@DrBeckerSchutte](#) [@pfanderson](#) [@mahoneyr](#) [#hcs](#)[m](#) Struck a nerve! We don't admit don't know! In medicine we play God. People expect us play God

6:46



[Jewels@She_Sugar](#)



[@SweeterCherise](#) [@dlscherm](#) Love that- my daughters doc is especially good at that - peds. [#hcs](#)

6:46



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@myHealthImpact](#) [@pfanderson](#) [@mahoneyr](#) Thanks. I try. In my profession, walking the talk matters. [#hcs](#)

6:46



[Aurelia Cotta@AureliaCotta](#)



[@pfanderson](#) [@mahoneyr](#) yep---or "well, this test result can change over time" let's see if different now [#hcs](#)

6:46



[Laurel Ann Whitlock@twirlandswirl](#)



Sausage time! And, my feet are cold. [#unrelatedtweets](#) [#hcs](#)

6:46



[P. F. Anderson@pfanderson](#)



[@myHealthImpact](#) [@DrBeckerSchutte](#) [@mahoneyr](#) Agree, Ann & Robert both shining stars tonight! Great convo! [#hcs](#)

6:46



[HealthSocMed | #hcs@HealthSocMed](#)



TOPIC 3 - Is there SM happening between patients and HCPs that impacts HC outcomes? Is there research on SM effectiveness? [#hcs](#)

6:46



[Marie Ennis-O'Connor@JBBC](#)



[@abrewi3010](#) i like that! [#hcs](#)

6:46



[Andrew Lopez, RN@nursefriendly](#)



[@marksalke](#) Yes Mark, and the early adopters, the [#trailblazers](#), the innovators will reap tremendous benefits ;) [#hcs](#)

6:47



[Anne Dang, CCPA@AnneCCPA](#)



[@BillWongOT](#) "I agree. I heard "we" a lot in my OT appt's," --> Helping patients feel that the HCP is invested too. Love this! [#hcs](#)

6:47



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@YinkaVidal](#) [@pfanderson](#) [@mahoneyr](#) I get a break there. Most folks don't expect psychologists to cure illness. [#hcs](#)

6:47



[Liza Bernstein@itshebunk](#)



T3 -- GREAT QUESTION!! [#hcs](#)

6:47



[Alan Brewington@abrewi3010](#)



[@nickdawson](#) [@HurtBlogger](#) exactly! We all want the same thing. Friendly, collaborative competition can only help [#hcs](#)

6:47



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) I know one of my ex-classmates did that. But I think that's too much work for me. [#hcs](#)

6:47



[Dana Lewis | #hcs@danamlewis](#)



T3 at [#hcs](#) - is there documented examples of SM between pts & providers that's impacting HC outcomes? Any research we can point to (yet)?

6:47



[Renza Scibilia@RenzaS](#)



MT [@HealthSocMed](#) T3 - Is there SM happening between patients and HCPs that impacts HC outcomes? Is there research on SM effectiveness? [#hcsn](#)

6:47



[Aurelia Cotta@AureliaCotta](#)



[@pfanderson](#) [@mahoneyr](#) Anything except, "well, you probably are imagining that agonizing pain, symptom, sign and see ya!" [#hcsn](#)

6:47



[Steven Incontrera@Steven_Paul](#)



[@RenzaS](#) [@She_Sugar](#) so true last visit I think I got a minute worth of eye contact and 9 minutes on back contact. [#HCSM](#)

6:47



[Alicia C. Staley@stales](#)



[@nickdawson](#) yes - absolutely. we need creative collaborative competition! [#hcsn](#)

6:47



[Liza Bernstein@itsthebunk](#)



RT [@JBBC](#): T1 My research on the value of blogs to enhance patient-provider communication ijph.blogs.springer.com/students-den/m... [#hcsn](#)

6:47



[P. F. Anderson@pfanderson](#)



[@DrBeckerSchutte](#) [@YinkaVidal](#) [@mahoneyr](#) True. :) But they do expect them to listen. [#hcsn](#)

6:48



[Marie Ennis-O'Connor@JBBC](#)



T3 we need more research on SM effectiveness but observationally would say it increases trust and understanding between pt and hcp [#hcsn](#)

6:48



[Jewels@She_Sugar](#)



[@mahoneyr](#) [@pfanderson](#) [@AureliaCotta](#) So true and to side jab another provider is unprofessional [#hcsn](#)

6:48



[Debra A. Barrath@dbarrath](#)



[@SweeterCherise](#) [@dlschermd](#) [@She_Sugar](#) Give them time to tell their story. [#hcsn](#) is so good for creating patient leadership, sharing stories

6:48



[Yinka Vidal@YinkaVidal](#)



[@HealthSocMed](#) [#hcsn](#) Honestly, it's too early to tell. Let's fix the [#affordablecare](#) computer problems. Perhaps a year from now. We can tell

6:48



[Jennifer Chevinsky@jchevinsky](#)



Wonder if SoMe encourages pt competition to become better health-service users...? [#hcsn](#)

6:48



[Ann Becker-Schutte@DrBeckerSchutte](#)



Wow, there's a mouthful. RT [@stales](#) [@nickdawson](#) yes - absolutely. we need creative collaborative competition! [#hcsn](#)

6:48



[Mark Salke@marksalke](#)



Nurse response. I'll pass. RT [@nursefriendly](#): [@Steven_Paul](#) [@vineapp](#) Interesting, do you have a link? [#hcsn](#)

6:48



[Robert Mahoney@mahoneyr](#)



Best answer may be to say, "Sounds like what you've been doing so far didn't work. Let's try something new."
[@AureliaCotta](#) [@pfanderson](#) [#hcs](#)

6:48



[Andrew Lopez, RN@nursefriendly](#)



[@fquire](#) [@TwiceDiabetes](#) [@AureliaCotta](#) True, shame on us if we recognize this and let them walk out the door anyhow :([#hcs](#)

6:48



[Renza Scibilia@RenzaS](#)



[@Steven_Paul](#) In diabetes, there is a lot of 'number contact' - some HCPs are all about the numbers - not the person. [#hcs](#)

6:49



[P. F. Anderson@pfanderson](#)



[@AureliaCotta](#) [@mahoneyr](#) Well, that was where previous doc had left it. I knew there was more 2do! & that 1 test came back 10% normal [#hcs](#)

6:49



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@LealMcCarthy](#) Good to see you! [#hcs](#)

6:49



[Jewels@She_Sugar](#)



[@dbarrath](#) [@SweeterCherise](#) [@dlscherm](#) We all have a story to tell and appts are very short- not much time for back and forth. [#hcs](#)

6:49



[T2D Research@T2DRemission](#)



[@DrBeckerSchutte](#) [@pfanderson](#) [@mahoneyr](#) May have mentioned here recently that as a pt I absolutely love it when HCPs look things up [#hcs](#)

6:49



[Dana Lewis](#) | [#hcs](#)[@danamlewis](#)



[@nickdawson](#) n of 1 is great, but I also want someone to compile so it becomes n of many :) [#hcs](#)

6:49



[Rusty Hoe](#)[@RustyHoe](#)



[@pfanderson](#) [@YinkaVidal](#) [@DrBeckerSchutte](#) [@mahoneyr](#) But not all pts Need to tailor approach to each God complex an instant turnoff 4 me [#hcs](#)

6:49



[Twice Diabetes](#)[@TwiceDiabetes](#)



Research on hcp use of SM [twicediabetes.com/hps-sceptical-...](#) [#hcs](#)

6:49



[Ann Becker-Schutte](#)[@DrBeckerSchutte](#)



I find small studies w/stories more compelling. RT [@nickdawson](#) T3: even "n of 1" studies are important - who's doing them? [#hcs](#)

6:49



[Nick Dawson](#)[@nickdawson](#)



[@nursefriendly](#) I overhead someone in coffee shop this morning get advice about migraines & hydration from barrista. self-care happens [#HCSM](#)

6:49



[Bill Wong](#)[@BillWongOT](#)



[@HealthSocMed](#) My OT connected with me on LI. But that was before she became my OT. We never brought it up as a subject. [#hcs](#)

6:49



[Alan Brewington@abrewi3010](#)



[@pfanderson](#) [@JBBC](#) competition among patients keeps us in control, HCP are there to help us compete. [#hcs](#)

6:49



[Alicia C. Staley@stales](#)



heehee RT [@DrBeckerSchutte](#): Wow, there's a mouthful. RT ... [@nickdawson](#) yes - absolutely. we need creative collaborative competition! [#hcs](#)

6:50



[Health Meets Tech@myHealthImpact](#)



[@mahoneyr](#) [@pfanderson](#) Wow! What [#transparency](#), but somehow we expect that "I don't know" means something different in care delivery. [#hcs](#)

6:50



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) [@AureliaCotta](#) You need to make a "Pearls" booklet w/ all these great phrases. If more docs used them and meant it wd be huge! [#hcs](#)

6:50



[Andrew Lopez, RN@nursefriendly](#)



[@myHealthImpact](#) The [#industry](#) will tap into the [#trailblazing](#) [#doctors](#) [#nurses](#) [#hcps](#) for their marketing teams :) [#hcs](#)

6:50



[Joyce Lee, MD, MPH@joyclee](#)



RT [@TwiceDiabetes](#): Research on hcp use of SM [goo.gl/OGQ03w](#) [#hcs](#)

6:50



[Robert Mahoney@mahoneyr](#)



To me, what makes a decision good is how it followed from what went into it, not necessarily what came out of it.
[@nickdawson](#) [#hcs](#)

6:50



[Jewels@She_Sugar](#)



[@fquire](#) [@TwiceDiabetes](#) [@AureliaCotta](#) [@nursefriendly](#) Always instill hope --Pt's can be beat up by disease.provider and self = despair [#hcs](#)

6:51



[Nick Dawson@nickdawson](#)



Speaks 2 power of story telling re [@AfternoonNapper](#) [@SusannahFox](#) RT [@DrBeckerSchutte](#): I find small studies w/stories more compelling [#hcs](#)

6:51



[P. F. Anderson@pfanderson](#)



[@RustyHoe](#) [@YinkaVidal](#) [@DrBeckerSchutte](#) [@mahoneyr](#) Another reason why diff strokes for diff folks, diff docs for diff patients [#hcs](#)

6:51



[Aurelia Cotta@AureliaCotta](#)



[@mahoneyr](#) [@pfanderson](#) that still leaves patient at fault for X issue. Better to blame random chance, equipment, anything. [#hcs](#)

6:51



[Natalia Shche, Ph.D.@creativepharma](#)



T3: in own research found that pharmacists involved in patient care, e.g. medication therapy management are more engaged with SoME [#hcs](#)

6:51



[Alex Burgess@AlexHBurgess](#)



I just updated my profile on LinkedIn. Please connect with me & join the discussion w/ 2200+ marketers. [lnkd.in/59ch3n](#)

[#hcs](#) [#hcmktg](#)

6:51



[Pam Ressler@pamressler](#)



RT [@joycee](#) RT [@TwiceDiabetes](#): Research on hcp use of SM [twicediabetes.com/hps-sceptical-...](#) [#hcs](#)

6:51



[Aurelia Cotta@AureliaCotta](#)



[@mahoneyr](#) [@pfanderson](#) (did I interpret that tweet--not sure?) [#hcs](#)

6:51



[Rusty Hoe@RustyHoe](#)



T3 my docs started reading my blog after lots of pts came talking about "the girl with the blog" has opened up pt experience 4 them [#hcs](#)

6:51



[Renza Scibilia@RenzaS](#)



[@TwiceDiabetes](#) Does this include research in 'newer' platforms like Twitter (tweet chats), FB (support groups) and blogs? [#hcs](#)

6:52



[P. F. Anderson@pfanderson](#)



[@nickdawson](#) [@nursefriendly](#) Coffee shops, barber shops, grocery stores all excellent places to provide health info for change [#hcs](#)

6:52



[Steven Incontrera@Steven_Paul](#)



T3: Without a doubt but few and far between. On the other end of the @ symbol sits a Healthcare Marketer not a doctor. [#HCSM](#)

6:52



[Andrew Lopez, RN@nursefriendly](#)



T3 Absolutely. [#BCSM](#) [#LCSM](#) and others are making huge strides towards affecting [#patient](#) outcomes :) [#hcsn](#)

6:52



[Annette McKinnon@anetto](#)



[@She_Sugar](#) Also really important to encourage each other, docs and patients. Everyone likes to feel they are making progress [#hcsn](#)

6:52



[Rusty Hoe@RustyHoe](#)



[@pfanderson](#) [@YinkaVidal](#) [@DrBeckerSchutte](#) [@mahoneyr](#) Exactly! [#hcsn](#)

6:52



[Jewels@She_Sugar](#)



[@nickdawson](#) [@nursefriendly](#) Advice can come from unlikely places, I gave it in the grocery store today myself (-: [#hcsn](#)

6:52



[Ann Becker-Schutte@DrBeckerSchutte](#)



Great motto! RT [@She_Sugar](#) Always instill hope --Pt's can be beat up by disease,provider and self = despair [#hcsn](#)

6:52



[Nick Dawson@nickdawson](#)



[@pfanderson](#) civic groups, churches, schools... [#HCSM](#)

6:52



[Bill Wong@BillWongOT](#)



[@AnneCCPA](#) yeah... My psych guy on the other hand, Doesn't make me feel that way, perhaps intimidated that I know a lot about ASD, too. [#hcsn](#)

6:52



[Pam Ressler@pamressler](#)



[@LealMcCarthy](#) [@TwiceDiabetes](#) Interesting that nurses visited the site more frequently than physicians [#hcsn](#)

6:52



[Liza Bernstein@itsthebunk](#)



Yes & also challenging ea othr! RT [@JBBC](#): T2 [@abrewi3010](#) is there compet btwn pts? IMO more collaborative model of learning/support [#hcsn](#)

6:52



[Ann Becker-Schutte@DrBeckerSchutte](#)



RT [@anetto](#) Also really important to encourage each other, docs and patients. Everyone likes to feel they are making progress [#hcsn](#)

6:53



[Andrew Lopez, RN@nursefriendly](#)



T3 Half the battle is finding [#trusted](#) [#credible](#) resources on [#SocialMedia](#). On [#Healthcare](#) [#Tweetchats](#) we facilitate this. [#hcsn](#)

6:53



[Cherise/LADA@SweeterCherise](#)



[@She_Sugar](#) [@dbarrath](#) Jewels and Debra, I agree story telling is important. But...Patients have to ask for help and understanding. [#hcsn](#)

6:53



[T2D Research@T2DRemission](#)



[@T2DRemission](#): [@DrBeckerSchutte](#) [@nickdawson](#) I have a great n=1 story if I could ever find a researcher to pick it up. [#hcsn](#)

6:53



[Rasu Shrestha MD MBA@RasuShrestha](#)



Social media is most effective in promoting wellness and awareness & encouraging engagement. [#HCSM](#) T3

6:53



[Marie Ennis-O'Connor@JBBC](#)



T3 Twitter has role to play in contributing to health based conversations directed at individual, community, and societal levels [#hcsn](#)

6:53



[Jewels@She_Sugar](#)



[@anetto](#) Always room for positivity - the human spirit thrives on it. Simple statements lift the heart. [#hcsn](#)

6:53



[Cherise/LADA@SweeterCherise](#)



“[@mahoneyr](#): T2 I don't know if [#hcsn](#) makes me a better doctor but not knowing anything about it would definitely make me a worse one.”

6:53



[Bill Wong@BillWongOT](#)



[@anetto](#) agreed... And conversely, don't make the patient feel down if they have setbacks. [#hcsn](#)

6:53



[Renza Scibilia@RenzaS](#)



The HCP giving a recent patient talk on diabetes and pregnancy referred FB support group and (my) blog. Great to know she is reading! [#hcsn](#)

6:53



[Andrew Lopez, RN@nursefriendly](#)



T3 I'm sure that [#marketing](#) & [#publicrelations](#) [#thinktanks](#) are studying [#SocialMedia](#) effectiveness very carefully. [#hcsn](#)

6:54



[Nick Dawson@nickdawson](#)



[@T2DRemission](#) might I shamelessly suggest you submit to the journal of participatory medicine for publication? [#HCSM](#)

6:54

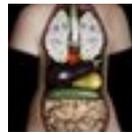


[Annette McKinnon@anetto](#)



[@nursefriendly](#) Yes, I tell people who want to get into health chats to follow you for schedule [#hcsn](#)

6:54



[Ron Mills@O2ron](#)



T3: Isn't the [@S4PM](#) and [@JourPM](#) on this case? [#hcsn](#)

6:54



[Mark Salke@marksalke](#)



[@JBBC](#) It's not just for fun anymore! Serious business. [#hcsn](#)

6:54



[Pam Ressler@pamressler](#)



+1 MT [@JBBC](#) T3 Twitter has role to play in contributing to health based convo directed at individual, community, societal levels [#hcsn](#)

6:54



[Jewels@She_Sugar](#)



[@SweeterCherise](#) [@dbarrath](#) Of course, but knowing you aren't "the only one" is important. [#hcsn](#)

6:54



[Andrew Lopez, RN@nursefriendly](#)



T3 No doubt in my mind [#BigPharma](#) and other [#ForProfit](#) entities, [#healthcare](#) industries are monitoring [#Some](#) reach. [#hcs](#)

6:55



[Alan Brewington@abrewi3010](#)



A3 all I know is the patients I've meet on SM have made me healthier and a better person. I've had no SM contact with any of my HCP [#hcs](#)

6:55



[Steven Incontrera@Steven_Paul](#)



[@creativepharma](#) I can tell you [@RxWiki](#) has brought 1000+ Pharmacist's to twitter hoping for better outcomes. [#HCSM](#)

6:55



[Renza Scibilia@RenzaS](#)



SM gives insight into 'real-life'living-with-it' side to chronic health conditions & an idea of what people are feeling/talking about [#hcs](#)

6:55



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) I did it informally with a friend who is trying to get into OT school after learning that she has 2 dx's recently. [#hcs](#)

6:55



[Ron Mills@O2ron](#)



RT [@nursefriendly](#) T3 No doubt in my mind [#BigPharma](#) and other [#ForProfit](#) entities, [#healthcare](#) industries are monitoring [#Some](#) reach. [#hcs](#)

6:55



[HealthSocMed | #hcs@HealthSocMed](#)



Time to wrap up tonight's [#hcs](#) chat! Please leave us with your last thought and/or something [#hcs](#)-related that you are

thankful for?

6:55



[Rusty Hoe@RustyHoe](#)



[@DrBeckerSchutte](#) [@JBBC](#) The only issue is good moderators and fasciliators on chats so it doesn't go astray [#hcs](#)

6:55



[Natalia Shche, Ph.D.@creativepharma](#)



[@RenzaS](#) [@TwiceDiabetes](#) in case you have not come across yet: ncbi.nlm.nih.gov/pubmed/23588823 another study examining diabetes FB group [#hcs](#)

6:55



[Renza Scibilia@RenzaS](#)



RT [@She_Sugar](#) [@SweeterCherise](#) [@dbarrath](#) Of course, but knowing you aren't "the only one" is important. [#hcs](#)

6:55



[Ann Becker-Schutte@DrBeckerSchutte](#)



[@YinkaVidal](#) [@pfanderson](#) [@mahoneyr](#) I need to know my core areas. I'm comfortable looking up cutting edge info/other specialties. [#hcs](#)

6:56



[Twice Diabetes@TwiceDiabetes](#)



[@YinkaVidal](#) I disagree,maybe some pts, it doesn't embarrass me [#hcs](#)

6:56



[Robert Mahoney@mahoneyr](#)



It's not enough to say, "I don't know", though. Still need to have a plan to find out. [@myHealthImpact](#) [@pfanderson](#) [#hcs](#)

6:56



[Health Meets Tech@myHealthImpact](#)



T3! [#SocialMedia](#) can be used as a proxy for patient provider communication effectiveness. Must consider those [#digitally](#) [#divided](#) [#hcs](#)

6:56



[Jennifer Chevinsky@jchevinsky](#)



Effectiveness of SoMe & the HCP-pt collaboration/outcomes ultimately limited by privacy concerns.. remains major deterrent for some. [#hcs](#)

6:56



[Dana Lewis | #hcs@danamlewis](#)



Wrapping up tonight's [#hcs](#) chat - last thoughts for week ahead and/or something [#hcs](#) related you are thankful for?

6:56



[Mia Behm@saymybehm](#)



[@Steven_Paul](#) [@creativepharma](#) [@RxWiki](#) RxWiki also has their very own pharmacists contributing to the conversation - so valuable. [#hcs](#)

6:56

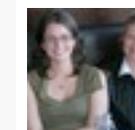


[P. F. Anderson@pfanderson](#)



[@nickdawson](#) Yep! Anywhere folk lead real lives. Ball parks, stadiums, gyms, parks ... [#hcs](#)

6:56



[Twice Diabetes@TwiceDiabetes](#)



[@DrBeckerSchutte](#) Thanks [#hcs](#)

6:56



[Steven Incontrera@Steven_Paul](#)



[@marksalke](#) [@nursefriendly](#) [@vineapp](#) oh yeah [articles.latimes.com/2013/may/23/bu...](#) [#HCSM](#)

6:56



[Notas Sobre Diabetes@MyDiabeticDiary](#)



[#hcs](#)m greetings

6:56



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) when I learned of my AS, my OT's did not do that. Then again, couldn't blame them cuz OT's with ASD are rare! [#hcs](#)m

6:56



[Andrew Lopez, RN@nursefriendly](#)



Final: Thankful that I've discovered so many great resources online to turn my [#patients](#) [#coworkers](#) onto. [#hcs](#)m

6:56



[HealthSocMed | #hcs@mHealthSocMed](#)



Also NOTE - no [#hcs](#)m next week b/c US Thanksgiving holiday (& moderator is running a marathon). We'll chat next on 12/8 at 8pm CT!

6:56



[Renza Scibilia@RenzaS](#)



I'm thankful for the diabetes online community - I've found this community to be very welcoming and non-judgemental! [#hcs](#)m

6:57



[Dana Lewis | #hcs@danamlewis](#)



RT [@HealthSocMed](#) NOTE - no [#hcs](#)m next week b/c US Thanksgiving holiday (& moderator is running a marathon). We chat next on 12/8 at 8pm CT!

6:57



[Ron Mills@O2ron](#)



T3: Participatory medicine is an emerging thing, with a place in the literature and legitimate clinical research into SM efficacy. [#hcs](#)

6:57



[Yinka Vidal@YinkaVidal](#)



[#hcs](#) Instead of saying, "I don't know!" Better to say, "I'll get back to you on that one." The patient will smile pleasantly!

6:57



[Ronette LealMcCarthy@LealMcCarthy](#)



Nice to meet you [@O2ron](#)! Enjoy connecting with fellow [#hcs](#) chat participants in our area.

6:57



[Rusty Hoe@RustyHoe](#)



[@mahoneyr](#) [@myHealthImpact](#) [@pfanderson](#) "I don't know" + a new referral or a commitment to further research is key [#hcs](#)

6:57



[Andrew Lopez, RN@nursefriendly](#)



Final: Thankful that I'm seeing more [#doctors](#) [#nurses](#) [#hcps](#), [#professionals](#) online every day, [#trailblazing](#) :) [#hcs](#)

6:57



[Marie Ennis-O'Connor@JBBC](#)



[@RustyHoe](#) yes..but we have some great examples to emulate [#hcs](#)

6:57



[Renza Scibilia@RenzaS](#)



[@creativepharma](#) Thank you so much - yes, I'm familiar with this study. [#HCSM](#)

6:57



[Bill Wong@BillWongOT](#)



[@She_Sugar](#) I helped out an OTS with AS a few months ago. She found me through a profile pic I put on FB, ironically. [#hcsn](#) 1/2

6:57



[T2D Research@T2DRemission](#)



[@She_Sugar](#) [@fqure](#) [@TwiceDiabetes](#) [@AureliaCotta](#) [@nursefriendly](#) Hand depressive referral sheet if it took all they've got 2 ask help? [#hcsn](#)

6:58

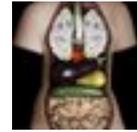


[Debra A. Barrath@dbarrath](#)



I so agree [@She_Sugar](#) [@SweeterCherise](#) - I've seen communities of like-minded people grow that way. [#hcsn](#)

6:58



[Ron Mills@O2ron](#)



Good night, all. Stay warm. [#hcsn](#)

6:58



[Andrew Lopez, RN@nursefriendly](#)



Final: Thankful that [#patients](#) are finding [#helpful](#) resources, in this very large [#haystack](#) that is called [#SocialMedia](#). [#hcsn](#)

6:58



[Dr. Gia Sison@giasison](#)



[@pfanderson](#) Well said Patricia! Innovation :) [@HealthSocMed](#) [#hcsn](#)

6:58



[P. F. Anderson@pfanderson](#)



[@mahoneyr](#) [@myHealthImpact](#) Dangerous thing to say to a librarian. Makes me tug at the leash, want to RUN [#hcs](#)

6:58



[Ann Becker-Schutte@DrBeckerSchutte](#)



Certainly thankful for all the collective wisdom I get to access in this group. [#hcs](#)

6:58



[Jennifer Chevinsky@jchevinsky](#)



Final thoughts: keep patient at the center and most everything else will fall in place! [#OpenDialogue](#) [#collaboration](#) [#tweetchats](#) [#hcs](#)

6:58



[Mark Salke@marksalke](#)



+1 RT [@DrBeckerSchutte](#): Go Dana!! RT [@HealthSocMed](#) NOTE - no [#hcs](#) next week b/c US Thanksgiving holiday (& moderator running a marathon).

6:58



[Robert Mahoney@mahoneyr](#)



Blaming pt is the last resort of a weak clinician. Doc's job is to fix problem, even if the pt is "at fault" [@AureliaCotta](#) [@pfanderson](#) [#hcs](#)

6:58



[Ronette LealMcCarthy@LealMcCarthy](#)



Thankful to continue to meet such knowledgeable professionals via Twitter. [#hcs](#)

6:59



[Sands & Company@SandsRealEstate](#)



JustListed [parealestate.com/Just+Listed!+4...](#) [#berks](#) [#realestate](#) [#TheNextBigThing](#) [#AMA2013](#) [#blogchat](#) [#SurvivorSeries](#) Nelly [#hcs](#) Icon Award 24-0 Broncos

6:59



[Jewels@She_Sugar](#)



Always thankful for providers listening ears, kind hearts and meaningful eye contact - this is where healing begins. [#hcs](#)

6:59



[Yinka Vidal@YinkaVidal](#)



[@HealthSocMed](#) [#hcs](#) Let's know the topics days ahead so you can get excellent answers from current research info during a chat.

6:59



[P. F. Anderson@pfanderson](#)



[@giasison](#) [@HealthSocMed](#) Yep. Social media is for innovators and leaders, not those who just want to barely keep their job [#hcs](#)

6:59



[Health Meets Tech@myHealthImpact](#)



[@mahoneyr](#) [@pfanderson](#) Absolutely work to find a solution, but keeping open honest communication with patient is key. [#hcs](#)

6:59



[Laurel Ann Whitlock@twirlandswirl](#)



And the rest of us, too. ;) RT [@LealMcCarthy](#) Thankful to continue to meet such knowledgeable professionals via Twitter. [#hcs](#)

6:59



[Renza Scibilia@RenzaS](#)



Good advice! MT [@jchevinsky](#) Final: keep patient at the center & most everything else will fall in place! [#collaboration](#) [#tweetchats](#) [#hcs](#)

7:00



[Robert Mahoney@mahoneyr](#)



By "you" I meant "you and your doctors". Not pt's fault. [@AureliaCotta](#) [@pfanderson](#) [#hcs](#)

7:00



[Yinka Vidal@YinkaVidal](#)



[@mahoneyr](#) [@AureliaCotta](#) [@pfanderson](#) [#hcs](#) Right! I say Amen to that one!

7:00



[Marie Ennis-O'Connor@JBBC](#)



Findings of recent Dutch study shows discordance in patients' and professionals' use of [#SoMe](#) in health [wp.me/p2oc7R-17w](#) [#hcs](#)

7:00



[HealthSocMed | #hcs@HealthSocMed](#)



That's a wrap on another great [#hcs](#) chat - thanks, all! See you again in TWO weeks (on 12/8) at 8pm CT for our next [#hcs](#) chat!
