
#hcsM - May 18, 2014

6:00 [HealthSocMed | #hcsM @HealthSocMed](#)

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

6:00 [Sherry Reynolds @Cascadia](#)

[#hcsM](#)! 6pm PST Join the health communications & social media community (topics develop on the fly) ^Sherry [#ptexperience](#) advocate + more

6:00 [T2D Research @T2DRemission](#)

About to be called to dinner, [#hcsM](#)! Will try to look in later.

6:00 [Gnosis Media Group @GnosisArts](#)

[#hcsM](#): marcomm practices in healthcare. Mod: [@HealthSocMed](#) When: Sun 8:00pm CST. [#tweetchatshappeningnow](#)

6:00 [HealthSocMed | #hcsM @HealthSocMed](#)

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

6:01 [Robert Mahoney @mahoneyr](#)

Greetings, [#hcsM](#), from sunny Saint Louis, MO.

6:01 [Elizabeth Hanes @EHanesRN](#)
Hello [#hcs](#)m from beautiful [#Houston](#) [#Texas](#).

6:01 [Erin Moore @ekeeley](#)moore
Hello! Erin from Cincinnati here. I'm a Family Partner on the clinical care team, ensuring pt/caregiver perspective is present.
[#hcs](#)m

6:01 [Alan Brewington @abrewi3010](#)
Alan here. Recently fed [#Medx](#) Scholar who will be speaking at Stanford on the 29th. I also have a bad headache today. This is me. [#hcs](#)m

6:02 [Joe Murphy @Joejohnmurphy](#)
Joe Murphy, survey+social media methodologist guy following and maybe joining [#hcs](#)m chat tonight.

6:02 [Laurel Ann Whitlock @twirlandswirl](#)
Laurel, photographer in Orlando, sharing some (unrelated) shots of Friday's rocket launch, just because: [flic.kr/s/aHsjYd2G3J](https://www.flickr.com/photos/laurelannwhitlock/14888888888/) [#hcs](#)m

6:02 [Patrick D. Herron @patrickdherron](#)
[#HCSM](#) Hello [@HealthSocMed](#) [@danamlewis](#) - Patrick joining in from Bronx/NYC

6:02 [Robert Mahoney @mahoneyr](#)

You can assume my [#hcs](#) tweets are mine unless someone else's name and picture are next to them.

6:02 [Jennifer Chevinsky @jchevinsky](#)

Jen, stopping by [#hcs](#) ...[@BioethxChat](#) moderator & bioethics/med student :)

6:02 [Bill Wong @BillWongOT](#)

Bill from Monterey Park, CA here. OT in California. [#hcs](#)

6:03 [Michelle Perron @PerronServices](#)

Greeting! Michelle here from NH. Just checking things out tonight. [#hcs](#)

6:03 [Dr. Gia Sison @giasison](#)

[@abrewi3010](#) Feel better soon Alan! [#hcs](#)

6:03 [AnnMarie Walsh @padschicago](#)

Helloooooooooo! [#hcs](#)

6:03 [Laurel Ann Whitlock @twirlandswirl](#)

[@abrewi3010](#) I've got a headache, too, actually. [#contagious](#)
[#hcs](#)

6:03 [Kati Debelic @Katiissick](#)

Good evening, Kati here 24/7 patient - see how long I can last
[#hcsn](#)

6:04 [Alan Brewington @abrewi3010](#)

[@giasison](#) thanks! I think it's my stupid neck that is causing the
headache. [#hcsn](#)

6:04 [AnnMarie Walsh @padschicago](#)

[@marksalke](#) Nice one! [#hcsn](#)

6:04 [David Chou @dchou1107](#)

[@dchou1107](#) CIO of an Academic medical center here [#hcsn](#)

6:04 [Diverse Alzheimers @DiverseAlz](#)

Hi [#HCSM](#) from UK. If you have a fave book w. dementia
related theme, pls tweet us. It's Dementia Awareness Week
here. [#dembk](#) [#diversealz](#)

6:04 [Alan Brewington @abrewi3010](#)

[@twirlandswirl](#) great minds hurt alike! [#hcsn](#)

6:05 [AnnMarie Walsh @padschicago](#)

[@abrewi3010](#) [@giasison](#) Ewww I hate those with the neck!
[#hcsn](#)

6:05 [Nicholas Magers, RD @NicholasMagers](#)
Checking in from smoky San Diego [#hcs](#)

6:05 [HealthSocMed | #hcs @HealthSocMed](#)
Welcome, everyone, to [#hcs](#)! Special hi to any first-timers joining tonight :), and of course our friendly lurkers. Tweet in anytime!

6:05 [Jennifer C / T1D @jenniferct1d](#)
Jennifer here. Checking things out. [#hcs](#)

6:06 [Dr. Gia Sison @giasison](#)
[@padschicago @abrewi3010](#) Me too :([#hcs](#)

6:06 [Heather Z @ZHeatherChamp](#)
Hi. I'm Heather. Trying to do this on my iPad. Wish me luck!
Patient advocate for Cowden's Syndrome & [#RareDisease](#).
[#hcs](#) [#pten](#)

6:06 [Alan Brewington @abrewi3010](#)
[@padschicago @giasison](#) so do !! Neck pain is the most demoralizing of all my pains I would say. [#hcs](#)

6:06 [Dana Lewis | #hcs @danamlewis](#)
Welcome, all, to [#hcs](#)! <-- Dana Lewis, [#hcs](#) creator/moderator; thinker | doer | teacher of health & digital. Chief Data Producer [#DIYPS](#).

- 6:06 [Robert Mahoney @mahoneyr](#)
Seems like there are many tweets with other people's name and picture next to them. And, curiously, they're not mine.
[@twirlandswirl](#) [#hcs](#)
- 6:06 [Constance P @Bristol_scaleMD](#)
Constance here. Gastroenterologist in Chicago. First timer
[#hcs](#)
- 6:06 [Mark Salke @marksalke](#)
[@jenniferct1d](#) A Tweeting finger! :) Welcome to the chat. [#hcs](#)
- 6:07 [Laurel Ann Whitlock @twirlandswirl](#)
[@DiverseAlz](#) Yeah, it's called "The Story of My Life." *sigh*
[#hcs](#)
- 6:07 [Laurel Ann Whitlock @twirlandswirl](#)
[@mahoneyr](#) [@marksalke](#) I posted pictures first! [#hcs](#)
- 6:07 [AnnMarie Walsh @padschicago](#)
[@abrewi3010](#) [@giasison](#) God bless my PCP for my pain meds!
=> [#hcs](#)
- 6:07 [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 [AnnMarie Walsh @padschicago](#)
Welcome! RT [@Bristol scaleMD](#) Constance here.
Gastroenterologist in Chicago. First timer [#hcs](#)

6:08 [harriseve @harriseve](#)
Sorry 2B L8..[#epatient](#) eve from SanFrancisco just returned
from vacation [#hcs](#)

6:08 [Lauren Still @laurenstill](#)
Is it [#hcs](#) time? Looking at [#PTSD](#) issues tonight, through a
different lens. Lauren from DC, but really SF.

6:08 [Robert Mahoney @mahoneyr](#)
So sorry. My mistake. Nothing says [#hcs](#) quite like a rocket
launch. Congrats! [@twirlandswirl](#) [@marksalke](#)

6:08 [Laurel Ann Whitlock @twirlandswirl](#)
[@mahoneyr](#) [@marksalke](#) I mean, not that I'm trying to
appropriate the pictures thing... but it IS kinda my day job....
[#hcs](#)

6:08 [Gail Zahtz @GailZahtz](#)
Sending lots of great thoughts to the family around the long-
standing [#HCSM](#)

6:09 [Dr. Gia Sison @giasison](#)
[@Bristol_scaleMD](#) Welcome Constance! [#hcsmd](#)

6:09 [Mark Salke @marksalke](#)
[@mahoneyr @twirlandswirl](#) Or a largemouth bass, for that matter! [#hcsmd](#)

6:09 [HealthSocMed | #hcsmd @HealthSocMed](#)
TOPIC 1 - We hear about "hacks", but what is a 'hack' in health care? When/how/why does a hack then become part of HC system? [#hcsmd](#)

6:09 [Laurel Ann Whitlock @twirlandswirl](#)
[@mahoneyr @marksalke](#) Haha, I know it's unrelated. But I get excitable about rocketry. [#hcsmd](#)

6:09 [Robert Mahoney @mahoneyr](#)
Hoping for a new [#hcsmd](#) picture record.... [@twirlandswirl @marksalke](#)

6:09 [Dana Lewis | #hcsmd @danamlewis](#)
T1 live at [#hcsmd](#) - talking about "hacks" (the GOOD kind) in HC - how does it go from a hack to a legitimate part of our system? Discuss.

6:10 [Marie Ennis-O'Connor @JBBC](#)
[#hcsmd](#) just jumping in from down under in Australia. Marie here, patient advocate

6:10 [Jonathan Hausmann MD @hausmannMD](#)
[@HealthSocMed](#): Hello! Pediatric and adult rheumatology
fellow in Boston [#hcs](#)

6:10 [Elizabeth Hanes @EHanesRN](#)
RT [@HealthSocMed](#) TOPIC 1: We hear abt "hacks", but what is
a 'hack' in health care? When/how/why does a hack become
part of HC system? [#hcs](#)

6:10 [April Foreman @DocForeman](#)
April, psychologist serving [#Veterans](#), prevention [#suicide](#), co-
founder of [#SPSM](#) chat, and diet coke drinker tonight. [#hcs](#)

6:10 [AnnMarie Walsh @padschicago](#)
Hee hee, sounds like a challenge! ;) RT [@mahoneyr](#) Hoping for
a new [#hcs](#) picture record.... [@twirlandswirl](#) [@marksalke](#)

6:11 [Robert Mahoney @mahoneyr](#)
Somehow the largemouth bass seems apropos. [@marksalke](#)
[@twirlandswirl](#) [#hcs](#)

6:11 [Mark Salke @marksalke](#)
A1: Forgive my ignorance I see the term alot. But can someone
define 'hack' for me? [#hcs](#)

6:11 [Dr. Gia Sison @giasison](#)

T1 A "hack" in healthcare IMO can range from any malicious anomaly or act-professional or technical [#hcsn](#)

6:11 [Liam Farrell @drifarrell](#)

sorry I'm late; Liam from Ireland;columnist,ex-family doc. 2 am here, just myself + the darkness [#hcsn](#)

6:11 [Dana Lewis | #hcsn @danamlewis](#)

[@marksalke](#) not ignorance! we usually start by defining a term so we understand the different perspectives around it. [#hcsn](#)

6:11 [Erin Moore @ekeeley Moore](#)

t1 Everything that patients do to manipulate medical devices and medications to serve them better is a hack [#hcsn](#)

6:11 [Elizabeth Hanes @EHanesRN](#)

RT [@marksalke](#) A1: Forgive my ignorance I see the term alot. But can someone define 'hack' for me? [#hcsn](#) > Trick or shortcut

6:11 [Marie Ennis-O'Connor @JBBC](#)

T1 hackathons are a great way to brainstorm collaboratively and come up with quick solutions [#hcsn](#)

6:12 [Kati Debelic @Katiissick](#)

[@DocForeman](#) I just got off Diet Pepsi, it was getting problematic and costly. :-D [#hcsn](#)

6:12 [Robert Mahoney @mahoneyr](#)

I'm guessing by "hack" we mean something akin to a shortcut or a better way, a la lifehacker? [#hcs](#)

6:12 [Alan Brewington @abrewi3010](#)

A1 I'm not sure I fully understand what a hack is. I think it's someone who brings a new idea to HC and gets it implemented [#hcs](#)

6:12 [Mark Salke @marksalke](#)

[@EHanesRN](#) Thank you! [#hcs](#)

6:12 [Dr. Gia Sison @giasison](#)

T1 Technically a hack is an unauthorized break in a system [#hcs](#)

6:13 [Laurel Ann Whitlock @twirlandswirl](#)

[@DocForeman](#) I had Coke Zero! My husband just confiscated it and drank the rest, though. :([#hcs](#)

6:13 [Elizabeth Hanes @EHanesRN](#)

T1: Not all hacks are malicious. Can be a helpful shortcut, tip or trick. [#hcs](#)

6:13 [Erin Moore @ekeeley Moore](#)

[@abrewi3010](#) Add an "er" [#hcs](#)

6:13 [Lauren Still](#) [@laurencstill](#)

I really really really wish everyone would stop using the word "hack" to describe everything, especially in healthcare. [#hcsn](#)

6:13 [Kati Debelic](#) [@Katiissick](#)

[@ekeeley Moore](#) it is worded a bit negatively, in my opinion hacking can be a good thing too [#hcsn](#)

6:13 [harriseve](#) [@harriseve](#)

T1 When/how/why does a hack become part of HC system? sometimes I think being [#patientnavigator](#) a hack for crappy communication [#hcsn](#)

6:13 [Elizabeth Hanes](#) [@EHanesRN](#)

T1: In PACU, we used syringe plungers instead of Carpuject device to deliver morphine. Faster, easier, accurate. A hack. [#hcsn](#)

6:14 [Jennifer Chevinsky](#) [@jchevinsky](#)

T1 'Hack' sounds like it might just be an informal way of saying 'clever innovation' [#hcsn](#)

6:14 [Marie Ennis-O'Connor](#) [@JBBC](#)

A1 here's an example from [@livestrong cancerhacks.org](#) [#hcsn](#)

6:14 [AnnMarie Walsh @padschicago](#)
Sometimes I think this is truth. LOL ;) [#hcs](#) [ow.ly/i/5BRAZ](#)

6:14 [Elizabeth Hanes @EHanesRN](#)
RT [@jchevinsky](#) T1 'Hack' sounds like it might just be an informal way of saying 'clever innovation' [#hcs](#) >> YES

6:14 [AnnMarie Walsh @padschicago](#)
Sometimes I think this is truth. LOL ;) [#hcs](#) [goo.gl/RtY0yM](#)

6:14 [Lauren Still @laurencstill](#)
Our system is broken, I get that, but using HC in an effective manner is not a "hack" but rather being.... just saying. I see few. [#hcs](#)

6:14 [Jennifer C / T1D @jenniferct1d](#)
A hack is like when I leave the same sensor in, but restart my continuous glucose monitor (for diabetes) so that it lasts 2x as long. [#hcs](#)

6:14 [Robert Mahoney @mahoneyr](#)
T1 Using wall suction for draining fluid during procedures. Definite hack. [#hcs](#)

6:15 [Liam Farrell @drifarrell](#)
T1 a "hack" can be a way of short-cutting Kafkaesque bureaucracy [#hcs](#)

6:15 [Tim C Nicholson @timbigfish](#)

A [#hack](#). The term has evolved from malicious and/or amateur to innovative. Healthcare [#hack](#)? It won't come from [#HCP](#) but a [#patient](#). [#hcs](#)[m](#)

6:15 [Bill Wong @BillWongOT](#)

[@jchevinsky](#) I feel that's what it sounds like, too! [#hcs](#)[m](#)

6:15 [Sherry Reynolds @Cascadia](#)

T1 Hack in geek speak ""A person adept at solving technical problems in clever and delightful ways"" [#hcs](#)[m](#)

6:15 [Mark Salke @marksalke](#)

A1: So isn't off-label prescribing a 'hack', then? :) [#hcs](#)[m](#)

6:15 [Marie Ennis-O'Connor @JBBC](#)

[@Cascadia](#) i like that definition "clever workarounds to existing systems" [#hcs](#)[m](#)

6:16 [Alan Brewington @abrewi3010](#)

A1 it does seem like an over played buzz word. As a patient I don't care about buzz words, I'm interested in results [#hcs](#)[m](#)

6:16 [Erin Moore @ekeeley Moore](#)

[@timbigfish](#) I think some [#HCPs](#) hack too. Patients def more, but let's not rule all [#HCPs](#) out :) [#hcs](#)[m](#)

6:16 [Robert Mahoney @mahoneyr](#)
T1 are all hacks local, or are there some hacks that have caught on nationally or globally? [#hcs](#)

6:16 [Kati Debelic @Katiissick](#)
[@DocForeman](#) enjoy! :-) no need to give reasons. Am not judging whatsoever [#hcs](#)

6:16 [Patrick D. Herron @patrickdherron](#)
Via [@SusannahFox](#) 3 home health care hacks [susannahfox.com/2014/03/20/3-h...](#) [#HCSM](#)

6:16 [Dr. Gia Sison @giasison](#)
Agree RT [@laurencstill](#): [@giasison](#) technically, it's using a system in a way it was not originally intended, authorized or not. [#hcs](#)

6:17 [Marie Ennis-O'Connor @JBBC](#)
A1 solving real world issues that impact the healthcare sector every day [#hcs](#)

6:17 [Mark Salke @marksalke](#)
[@danielg280](#) I bet the lawyers shudder at the thought of healthcare 'hacks', Dan. [#hcs](#)

6:17 [Heather Z @ZHeatherChamp](#)
[@abrewi3010](#) Well said. [#hcs](#)

6:17 [Jennifer Chevinsky @jchevinsky](#)
T1 'Hack' might be reflective of perception of the individual who thought of the idea. Expert innovator prob isn't making 'hacks' [#hcs](#)

6:17 [Kati Debelic @Katiissick](#)
"Hack my disease" would definitely translate to "live in my shoes for a while" and it would make the world all better [#hcs](#)

6:17 [Bill Wong @BillWongOT](#)
[@mahoneyr](#) I think some can generate international attention-like this [quicknessdirtytips.com/house-call-doc...](#) [#hcs](#)

6:17 [Jonathan Hausmann MD @hausmannMD](#)
Hacks are innovative solutions to healthcare problems. Often made quickly, cheaply at Hackathons such as [@HackPediatrics](#) [#hcs](#)

6:17 [Elizabeth Hanes @EHanesRN](#)
RT [@ekeeley Moore](#) Hack - cutting a pill in half to elude side effects, save money, spread dosage over longer time. [#hcs](#)

6:17 [Dr. Gia Sison @giasison](#)
[@mahoneyr](#) Can happen globally Robert [#hcs](#)

6:17 [Laurel Ann Whitlock @twirlandswirl](#)
T1 Not sure how legal that actually is, though? [#hcs](#)

6:18 [Lauren Still @laurencstill](#)
So, this topic rubs me the wrong way. Bowing out before I say something I shouldn't. [#hcs](#)

6:18 [Laurel Ann Whitlock @twirlandswirl](#)
[@ekeeley Moore](#) ...heh, that's what I just said. [#hcs](#)

6:18 [Heather Z @ZHeatherChamp](#)
[@EHanesRN @ekeeley Moore](#) Based on that definition, I'm a hack of sorts. [#hcs](#)

6:18 [Tim C Nicholson @timbigfish](#)
[@ekeeley Moore](#) Anyone can play. That's the beauty of a [#hack](#).
And love your practical example of cutting a pill in half. Simple.
[#hcs](#)

6:18 [Robert Mahoney @mahoneyr](#)
Can't get the link to open but I like the title. Intrigued.
[@BillWongOT #hcs](#)

6:18 [Erin Moore @ekeeley Moore](#)
[#t1](#) Patients are hacking all the time. And then they share that innovative knowledge on Facebook, [@smart_patients](#), Twitter [#hcs m](#)

6:18 [Lauren Still @laurencstill](#)
But please, stop using that word. [#hcs m](#)

6:18 [Dr. Gia Sison @giasison](#)
[@hausmannMD](#) [@HackPediatrics](#) Good kind of hack [#hcs m](#)

6:19 [Heather Z @ZHeatherChamp](#)
[@jchevinsky](#) [@EHanesRN](#) [@jchevinsky](#) I like that! [#hcs m](#)

6:19 [Sylvia English @blancfang](#)
T1: the 'hack' seems removed from the structure of a HC system. The real question is can they work safely? [#hcs m](#)

6:19 [Bill Wong @BillWongOT](#)
[@mahoneyr](#) it's actually a podcast series you can subscribe to on iTunes. [#hcs m](#)

6:19 [Marie Ennis-O'Connor @JBBC](#)
T1 creative application of technology and ideas to bring solutions to healthcare [#hcs m](#)

6:19 [Elizabeth Hanes @EHanesRN](#)

RT [@ekeeley Moore #1](#) Patients are hacking all. the. time.
Then they share that innovative knowledge on Facebook,
[@smart_patients #hcs](#)

6:19 [Sherry Reynolds @Cascadia](#)

[@laurencstill](#) understand and appreciate your voice -btw
ePatients are one of the most powerful change agents (aka
hackers) in health [#hcs](#)

6:19 [Robert Mahoney @mahoneyr](#)

Trying to think of a global hack. Would [#choosingwisely](#) count?
[@giasison #hcs](#)

6:19 [Jennifer C / T1D @jenniferct1d](#)

Hacks are helpful for someone living with a chronic illness 24/7.
Making life a little easier.. [#hcs](#)

6:20 [Robert Mahoney @mahoneyr](#)

Awesome. Will check it out. [@BillWongOT #hcs](#)

6:20 [Laurel Ann Whitlock @twirlandswir](#)

T1 Or little things, like setting an alarm on your phone to
remember to take meds on time or such. [#hcs](#)

6:20 [Erin Moore @ekeeley Moore](#)

We use CPAP mask for breathing treatments because it doubles then as a PEP device. And he can play Memory without the mask falling off [#hcs m](#)

6:20 [Bill Wong @BillWongOT](#)

[@ekeeley Moore](#) [@smart_ patients](#) and some clinicians who double as clients can also be hacks, right? [#hcs m](#)

6:20 [Sherry Reynolds @Cascadia](#)

RT [@mahoneyr](#): Trying to think of a global hack. Would [#choosingwisely](#) count? [@giasison](#) [#hcs m](#) ^I hope so I volunteer for a [#AF4Q](#) org

6:20 [Dr. Gia Sison @giasison](#)

[@mahoneyr](#) Checking on that Robert [#hcs m](#)

6:20 [Mark Salke @marksalke](#)

The millennial way of saying it! Lol! MT [@jchevinsky](#): T1 'Hack' sounds like just an informal way of saying 'clever innovation' [#hcs m](#)

6:20 [Erin Moore @ekeeley Moore](#)

[@jenniferct1d](#) Or a lot! I think we hack more than we think in the chronic disease space [#hcs m](#)

6:21 [Elizabeth Hanes @EHanesRN](#)

RT [@ekeeley Moore](#) We use CPAP mask for breathing treatments bec it doubles as a PEP device & he can play Memory w/o mask falling off [#hcs m](#)

6:21 [Kati Debelic @Katiissick](#)

There has to be a better term than 'hacking' because it's got a negative connotation [#hcs m](#)

6:21 [Jennifer Chevinsky @jchevinsky](#)

T1 Incorporation of hacks into healthcare system often entails moving pride aside, and letting simple solution speak for itself [#hcs m](#)

6:21 [AnnMarie Walsh @padschicago](#)

This is my kind of "hack"... [#photo](#) [#hcs m](#)

6:21 [Erin Moore @ekeeley Moore](#)

[@BillWongOT](#) [@smart_patients](#) When we all work together we create systems and tools (meds) that work for all of us [#hcs m](#)

6:21 [Dr. Gia Sison @giasison](#)

[@hausmannMD](#) [@mahoneyr](#) Going through the tracks of [#choosingwisely](#) and Im becoming one myself :) [#hcs m](#)

6:21 [AnnMarie Walsh @padschicago](#)

This is my kind of "hack"... [#photo](#) [ow.ly/i/5BRAZ](#) [#hcs m](#)

6:21 [Mark Salke @marksalke](#)
[@JBBC](#) Heaven knows there's lots of opportunity, eh Marie?
[#hcs](#)

6:22 [Kati Debelic @Katiissick](#)
RT [@jchevinsky](#): T1 Incorporation of hacks into hc syst often entails moving pride aside, and letting simple solution speak for itself [#hcs](#)

6:22 [Bill Wong @BillWongOT](#)
[@ekeeley](#) [@smart_patients](#) yes... And if some professions can have their licenses be portable, will be an even greater hack. [#hcs](#)

6:22 [Alan Brewington @abrewi3010](#)
A1 can we "hack" a policy? Or does hacking always have to be in the technical/treatment part of healthcare? [#hcs](#)

6:23 [Mark Salke @marksalke](#)
[@Katiissick](#) Kati, I think 'hack' and 'hacker' are quite different usages. [#hcs](#)

6:23 [Lauren Still @laurencstill](#)
The last thing I want in HC is a hack, as it undermines both the technical community, and the patient community. [#hcs](#)

6:23 [Tim C Nicholson @timbigfish](#)
[#Hack](#) it all. RT [@abrewi3010](#): A1 can we "hack" a policy? Or does it always have to be in the technical/treatment part of healthcare? [#hcs](#)

6:24 [Bill Wong @BillWongOT](#)
[@abrewi3010](#) in terms of OT licensing- the only way now is to get licenses in different states aside from the residing state.
[#hcs](#)

6:24 [Amy Byer Shainman @BRCAresponder](#)
[@danamlewis](#) [#hcs](#) What am I missing? I don't get this.

6:24 [Sherry Reynolds @Cascadia](#)
T1 hacking is not only innovative but often simple and from unexpected sources - [@Katiissick](#) is right some neg connotation [#hcs](#)

6:24 [Constance P @Bristol_scaleMD](#)
[@abrewi3010](#) this would have more legal implications I believe than, say, cutting pills in half-type hacking [#hcs](#)

6:24 [Erin Moore @ekeeley Moore](#)
[@laurencstill](#) Undermines? How so? [#hcs](#)

6:24 [Hospital Tech @HospitalTech](#)
[#hcs](#) – May 18, 2014 goo.gl/BNj4aq

- 6:24 [Dana Lewis | #hcs](#) [@danamlewis](#)
[@BRCAresponder](#) can you clarify your question? [#hcs](#)
- 6:25 [Andrew Lopez, RN @nursefriendly](#)
Discover Martine Ehrenclou, [@Med_writer](#), Author of "The Take Charge-Patient" [#hcs](#) [#Nurseup](#) [#Authors](#) [#healthcare](#) [ow.ly/wZ6jy](#)
- 6:25 [David Chou @dchou1107](#)
learning something new about 'hack' today [#hcs](#)
- 6:25 [Lauren Still @laurencstill](#)
[@ekeeleymoore](#) It favors payers and providers, 100%. [#hcs](#)
- 6:25 [Amy Byer Shainman @BRCAresponder](#)
[@danamlewis](#) I don't get hack and hacking. [#hcs](#) Can someone please clarify?
- 6:26 [Bill Wong @BillWongOT](#)
[@jchevinsky](#) weird thing with OT treatment sometimes- my clients might feel that way! [#hcs](#)
- 6:26 [Laurel Ann Whitlock @twirlandswir](#)
[@laurencstill](#) It can improve all the communities. An easier but just as safe/effective way to do something would be awesome, right? [#hcs](#)

6:26 [Kati Debelic @Katiissick](#)
[@blancfang](#) how about 'let's go viral' ? :-) [#hcs](#)

6:26 [Erin Moore @ekeeley](#)
[@laurencstill](#) I respectfully disagree. Everyday hacks that we do actually favor pts. Now I want way that we can have it benefit all [#hcs](#)

6:27 [Laurel Ann Whitlock @twirlanswirl](#)
[@laurencstill](#) I mean, all minimally invasive procedures were basically hacks at first, how does that undermine anything?
[#hcs](#)

6:27 [Lauren Still @laurencstill](#)
There's a big difference in cutting your pill in half, and using [@evernote](#) for your [#EMR](#) or building your own [#EKG](#). All have risks. [#hcs](#)

6:27 [Bill Wong @BillWongOT](#)
[@abrewi3010](#) weakness of this kind of hack is that each state requires a little differently for renewal, as well as cost to maintain! [#hcs](#)

6:27 [Kati Debelic @Katiissick](#)
Would you call prescribing an off-label drug a hack? [#hcs](#)

6:27 [Sherry Reynolds @Cascadia](#)
[@laurencstill](#) what if we used different language? i.e. innovative
new ways to solve long standing problems - i.e. [#mhealth?](#)
[#HCSM](#)

6:28 [HealthSocMed | #hcsn @HealthSocMed](#)
Great T1 dialogue - moving to T2 in a few! [#hcsn](#)

6:28 [Ruth Ann Crystal, MD @CatchTheBaby](#)
[#hcsn](#) T1: My 'hack'- I use the baby monitoring belts and to
hold on a c-section bandage instead of tape as the tape can
irritate skin.

6:28 [Lauren Still @laurencstill](#)
[@twirlandswirl](#) So how do you address PHI security concerns?
Will you allow me to hack your data? [#hcsn](#)

6:28 [Jennifer Chevinsky @jchevinsky](#)
[@blancfang @Katiissick](#) IMO may not necessarily be dif
between a 'hack' and a 'simple solution;' not sure
implementation is the dif [#hcsn](#)

6:28 [Bill Wong @BillWongOT](#)
[@laurencstill @evernote](#) as a client- sometimes I had to cut my
anti-anxiety pills in half, cuz they don't have smaller size
available. [#hcsn](#)

6:28 [Erin Moore @ekeeley Moore](#)
[@Katiissick](#) I think you could [#hcs](#)

6:29 [Mark Salke @marksalke](#)
I'm astounded at all the creative hacks found in healthcare!
[#hcs](#)

6:29 [Elizabeth Hanes @EHanesRN](#)
.MT [@CatchTheBaby #hcs](#) T1: My 'hack'- I use baby
monitoring belts & to hold on a c-section bandage because tape
can irritate skin. > LOVE!

6:29 [Lauren Still @laurencstill](#)
[@Cascadia](#) I'm fine with that. I hate hate hate the term "hack"
used on everything. It's not. Unless you are ok with me stealing
PHI. [#hcs](#)

6:29 [Joe Murphy @Joejohnmurphy](#)
T1 Hack implies breaking rules a bit, making something do
what it wasn't designed for, but results in a breakthrough.
[#hcs](#)

6:29 [Lauren Still @laurencstill](#)
[@BillWongOT @evernote](#) awesome, me too. Not a hack.
[#hcs](#)

6:29 [Bill Wong @BillWongOT](#)

as for my personal hack, I will chat with my [#OT](#) friends on Facebook and talk to them about how I am feeling if I need a pep talk. [#hcs](#)

6:30 [Erin Moore @ekeeley Moore](#)

Doc hacking! RT [@CatchTheBaby](#): [#hcs](#) T1: I use baby monitoring belts to hold c-section bandage instead of tape as it can irritate skin. [#hcs](#)

6:30 [Ruth Ann Crystal, MD @CatchTheBaby](#)

[#hcs](#) [@BRCAresponder](#) [@danamlewis](#) Hack is using something for a different purpose (MacGyver). Hacking is to break into a computer syst [#hcs](#)

6:30 [Elizabeth Hanes @EHanesRN](#)

A1: I am a [#healthcare](#) "hack" of a different kind: I'm a [#writer](#). heh [#hcs](#)

6:30 [Laurel Ann Whitlock @twirlandswirl](#)

[@laurencstill](#) I don't think anyone here is talking about computer or data hacking. "Hack" means "a new solution or method." [#hcs](#)

6:30 [HealthSocMed | #hcs](#) [@HealthSocMed](#)

TOPIC 2 - We want more data and transparency in HC. But - how much data is too much data? For HCPs? For patients? Why? & how to deal? [#hcs](#)

- 6:30 [Lauren Still @laurencstill](#)
[@wareFLO](#) ding ding ding. Super misleading, dismisses security issues. [#hcs](#)
- 6:30 [Dana Lewis | #hcs @danamlewis](#)
T2 live at [#hcs](#) - discussing how much data is too much data; how to tell, and what to do if so?
- 6:31 [April Foreman @DocForeman](#)
[@JBBC @harriseve](#) I talk about "hacking" the limbic system to manage PTSD "flashes" and to reduce arousal that leads to anxiety. [#hcs](#)
- 6:31 [Faisal Qureshi @fqure](#)
T1 whether like/dislike 'hack' understand that healthcare can't afford to miss out next innovation wherever it comes from [#hcs](#)
- 6:31 [Jennifer Chevinsky @jchevinsky](#)
T2 Maybe I've become too much of a regular here... I feel like we recently discussed 'how much data is too much' ..! [#hcs](#)
- 6:31 [Elizabeth Hanes @EHanesRN](#)
RT [@HealthSocMed](#) T2 - We want more data & transparency in HC. But how much data = too much? For HCPs? For pts? Why? & how to deal? [#hcs](#)

- 6:31 [Annette McKinnon @anetto](#)
[@BillWongOT](#) Seems to me that all of the OT devices and tricks I use to cope would count as hacks [#hcsn](#)
- 6:31 [Lauren Still @laurencstill](#)
[@twirlandswirl](#) they should be. period. only thing "hack" should allude to. ever. [#hcsn](#)
- 6:31 [David Chou @dchou1107](#)
A2: Patients can get their data anytime they want. No need to hide anything, just be open [#hcsn](#)
- 6:31 [Dan Goldman @danielg280](#)
[@marksalke](#) So long as its legal, we're all for it! Honestly, innovation almost always ruffles feathers; its part of the process [#hcsn](#)
- 6:31 [AnnMarie Walsh @padschicago](#)
T2 It's too much data if you stop looking at the big picture and stop thinking "outside the box". [#hcsn](#)
- 6:32 [Marie Ennis-O'Connor @JBBC](#)
[@DocForeman](#) that's interesting! [#hcsn](#)
- 6:32 [Erin Moore @ekeeley Moore](#)
t2 -doesn't have to be a one size fits all. create a toolbox and then pts can work together w [#hcp](#)'s to figure out whats best for them [#hcsn](#)

6:32 [Laurel Ann Whitlock @twirlandswirl](#)
[@laurencstill](#) ...why? [#hcs](#)

6:32 [Jennifer C / T1D @jenniferct1d](#)
T2 How much data is too much will vary pt to pt. [#hcs](#)

6:32 [Ginny Angert @GinPNP](#)
T2: Managing data pseudo-hack: Individuals using DropBox for storing PHI - easier than current PHR or portal fx [#hcs](#)

6:32 [Mark Salke @marksalke](#)
A2: 'Data' is not 'information'. We want data that informs us.
[#hcs](#)

6:32 [Healthy Startups @healthystartups](#)
Sad/ sorry I haven't been able to join [#hcs](#) [#hcs](#)anz for a while. Flat out. Will hopefully get back into things post [@health_xl](#) in Dublin

6:32 [Lauren Still @laurencstill](#)
[@wareFLO](#) hahah, never. I'm sure you have some white paper to pull out. [#hcs](#)

6:32 [Jennifer Chevinsky @jchevinsky](#)
T2 Collect data with a purpose. Be cognoscente of whether the 'data collection' inconveniences patients [#hcs](#)

6:32 [Kati Debelic @Katiissick](#)

T2 redundancy is better than not enough data, not enough documentation. [#hcsn](#)

6:32 [Dan Goldman @danielg280](#)

I'm guessing data scientists would say you can never have too much data, privacy advocates, exactly the opposite [#hcsn](#)

6:33 [Lauren Still @laurencstill](#)

[@twirlandswirl](#) because that is a hack..... [#hcsn](#)

6:33 [Bill Wong @BillWongOT](#)

As a client- it will be going through a report that is more than 5 pages for me! [#hcsn](#)

6:33 [Elizabeth Hanes @EHanesRN](#)

RT [@Katiissick](#) T2 redundancy is better than not enough data, not enough documentation. [#hcsn](#)

6:33 [Laurel Ann Whitlock @twirlandswirl](#)

[@laurencstill](#) THIS usage of hack is the real, original usage of the word. Computer hackers appropriated it. [#hcsn](#)

- 6:33 [David Chou @dchou1107](#)
[@GinPNP](#) I blame the CIO for not creating an enterprise cloud solution therefore people use 'dropbox' as a hack [#hcs](#)
- 6:33 [Marie Ennis-O'Connor @JBBC](#)
[@DocForeman](#) love the analogy - see how it could work [#hcs](#)
- 6:33 [Laurel Ann Whitlock @twirlandswirl](#)
[@laurencstill](#) Technically, the usage you suggest as the only correct one is more incorrect than the other. [#hcs](#)
- 6:33 [Elizabeth Hanes @EHanesRN](#)
Good point! RT [@abrewi3010](#) A2 to much data is when the patient becomes frozen & doesn't know how to continue. [#hcs](#)
- 6:34 [Ginny Angert @GinPNP](#)
[@dchou1107](#) I wish it were that easy! Civil right but not so easy to execute! Portals only include abbrev. CCDA info not even all data [#hcs](#)
- 6:34 [Ruth Ann Crystal, MD @CatchTheBaby](#)
RT [@marksalke](#) A2: 'Data' is not 'information'. We want data that informs us. [#hcs](#)
- 6:34 [Elizabeth Hanes @EHanesRN](#)
A2: Whenever the amount of data overwhelms, it is too much. [#hcs](#)

6:34 [Jennifer Chevinsky @jchevinsky](#)
T2 Collect data with a purpose. Be cognizant of whether the 'data collection' inconveniences patients [#hcs](#)

6:35 [April Foreman @DocForeman](#)
[@HealthSocMed](#) "It depends." On your goals, desired outcomes, etc. Data is a means, not an end. [#hcs](#)

6:35 [Lauren Still @laurencstill](#)
[@twirlandswirl](#) that's cute. meanwhile, can I point to some solutions to safeguard your PHI? [#hcs](#)

6:35 [Elizabeth Hanes @EHanesRN](#)
Yes. RT [@DocForeman](#) [@HealthSocMed](#) "It depends." On your goals, desired outcomes, etc. Data is a means, not an end. [#hcs](#)

6:35 [Robert Mahoney @mahoneyr](#)
T2 I think you cross the "too much data" threshold when the data become non-actionable. [@HealthSocMed](#) [#hcs](#)

6:35 [Ginny Angert @GinPNP](#)
[@dchou1107](#) Not just CIO but entire [#healthIT](#) and proprietary [#PHI](#) data business. [#innovation](#) and market demand is only way to change [#hcs](#)

6:35 [Elizabeth Hanes @EHanesRN](#)
Good point. RT [@mahoneyr](#) T2 I think you cross the "too much data" threshold when the data become non-actionable.
[@HealthSocMed](#) [#hcs](#)

6:35 [Annette McKinnon @anetto](#)
[@EHanesRN](#) That would take massively personalized data solutions given the wide variations in health literacy [#hcs](#)

6:36 [Tim C Nicholson @timbigfish](#)
Giving [#patients](#) their data? Done. Now let's get busy giving them the tools to use the data toward living their best lives.
[#hcs](#)

6:36 [Alan Brewington @abrewi3010](#)
A2 if docs can't translate data into information for patient care then there is too much data. [#hcs](#)

6:36 [Kati Debelic @Katiissick](#)
With the electronic health record and recording devices such as fitbit and such, who cares about daily data? The computer can manage [#hcs](#)

6:36 [Sherry Reynolds @Cascadia](#)
T2 few providers want more "data" on individual level - want actionable info but [#bigdata](#) is powerful for population health
[#hcs](#)

- 6:36 [April Foreman @DocForeman](#)
[@JBBC](#) My younger Vets get it very quickly. Do things that make it hard for "fight or flight" response to engage. [#hcsn](#)
- 6:36 [Laurel Ann Whitlock @twirlandswirl](#)
[@laurencstill](#) I'm sorry, that's a little condescending. This is actual information, if you don't like it, fine. But don't belittle me. [#hcsn](#)
- 6:36 [David Harlow @healthblawg](#)
T2 Pt has rt to all data in EHR; clinician shd hv access to pt-gen data (fr monitors, trackers) but data must B org'd, EZ to overdo [#hcsn](#)
- 6:36 [Elizabeth Hanes @EHanesRN](#)
OK RT [@anetto @EHanesRN](#) That would take massively personalized data solutions given the wide variations in health literacy [#hcsn](#)
- 6:36 [Mark Salke @marksalke](#)
And? RT [@anetto @EHanesRN](#) That would take massively personalized data solutions given the wide variations in health literacy [#hcsn](#)
- 6:37 [Ruth Ann Crystal, MD @CatchTheBaby](#)
[#hcsn](#) T2: My pet peeve- reqd to collect lg amt of data in the hosp EMR 4 later research purposes. Filling in all of those boxes wastes time.

6:37 [Mark Salke @marksalke](#)
[@anetto](#) [@EHanesRN](#) Annette, you've hit on an excellent point.
Why shouldn't data be personalized for patients? [#hcs](#)

6:37 [Robert Mahoney @mahoneyr](#)
In medicine I think we sometimes collect data for data's sake
and we end up with information we can't do something with.
[@HealthSocMed](#) [#hcs](#)

6:38 [Kati Debelic @Katiissick](#)
[@mahoneyr](#) providing data for research, for instance the
nurses cohort, has been providing important info even if it didn't
matter then [#hcs](#)

6:38 [Elizabeth Hanes @EHanesRN](#)
RT [@marksalke](#) [@anetto](#) [@EHanesRN](#) Annette, you've hit on
an excellent point. Why shouldn't data be personalized for
patients? [#hcs](#)

6:38 [Alan Brewington @abrewi3010](#)
[@BillWongOT](#) [@EHanesRN](#) info only good though if it is
actionable. Otherwise all you have is answers to bar trivia I
believe. [#hcs](#)

6:38 [Lauren Still @laurencstill](#)
[@Cascadia](#) yeah, I get that, but it's still a misnomer when it
comes to security, risk, information, etc. Buzzword, at most.
[#hcs](#)

6:38 [Lauren @unxpctdblessing](#)

Anyone who thinks "hacking" is new to medicine is wrong - folks have been "hacking" medicine since the dawn of time. [#hcs](#)

6:38 [April Foreman @DocForeman](#)

[@mahoneyr](#) [@HealthSocMed](#) That's almost every medical record I've seen. [#hcs](#)

6:39 [Elizabeth Hanes @EHanesRN](#)

RT [@abrewi3010](#) [@BillWongOT](#) [@EHanesRN](#) info only good though if it is actionable. > So, data as a bar trivia hack?? [#hcs](#)

6:39 [Lauren @unxpctdblessing](#)

Also, "hacking" is not just a computer/technology term. It's more of a lifestyle term. "Cracking" is more the tech term than hacking. [#hcs](#)

6:39 [AnnMarie Walsh @padschicago](#)

RT [@unxpctdblessing](#) Anyone who thinks "hacking" is new to medicine is wrong - have been "hacking" medicine since the dawn of time. [#hcs](#)

6:39 [harriseve @harriseve](#)

Yes & context; interpretation MT [@marksalke](#): A2: 'Data' is not 'information'. We want data that informs us [#hcs](#)

6:39 [Sylvia English @blancfang](#)

T2: we need data, it needs to be short, sharp & accurate for HCP, & digestible for the individual patient [#hcsn](#)

6:39 [Kati Debelic @Katiissick](#)

[@Cascadia](#) the scale just being there is a threat and people will find out how to very quickly. problemis with pts not owning one :-)
[#hcsn](#)

6:39 [Bill Wong @BillWongOT](#)

[@abrewi3010 @EHanesRN](#) but sometimes you do need background info to understand data or information. Hence reports might include such. [#hcsn](#)

6:39 [Elizabeth Hanes @EHanesRN](#)

A2: I don't think there is ever "too much" data. It's distilling it into meaningful info that counts. [#hcsn](#)

6:40 [Laurel Ann Whitlock @twirlandswirl](#)

[@unxpctdblessing](#) I tried that. Now I don't want to play anymore. [#hcsn](#)

6:40 [Annette McKinnon @anetto](#)

[@marksalke](#) Do we now have the capacity to do that and build it in to EHR? [#hcsn](#)

6:40 [Clay Chappell, MD @CChappellMD](#)

T2: Part of the problem with EMRs. They collect tons of data, but how much of we really use? Need to ID relevant data easily. [#hcs](#)

6:40 [Ruth Ann Crystal, MD @CatchTheBaby](#)

Agree MT [@mahoneyr](#) In medicine we sometimes collect data for data's sake and we end up with information we can't do something with. [#hcs](#)

6:40 [Robert Mahoney @mahoneyr](#)

I think that's the difference between research (data for future knowledge) and patient care (data to help pt now) [@Katiissick](#) [#hcs](#)

6:40 [Bill Wong @BillWongOT](#)

[@blancfang](#) in HCP terms, that means pick the best combo of assessments to get the job done in the most compact way. [#hcs](#)

6:40 [Sherry Reynolds @Cascadia](#)

T2 I worry that we are falling in love with data and missing out on qualitative aspects of health [#hcs](#)

6:40 [David Harlow @healthblawg](#)

RT [@marksalke](#) [@Cascadia](#) The real promise of [#bigdata](#) the future of it, really, is personalization. The technology exists. [#hcs](#) [#hcs](#)

6:41 [Constance P @Bristol_scaleMD](#)
[@blancfang](#) agree. It's up to the HCP to interpret the data and make it meaningful for the patient [#hcsn](#)

6:41 [Robert Mahoney @mahoneyr](#)
Yup. The less helpful the info, the more likely that it's what arrives with the patient. [@DocForeman](#) [@HealthSocMed](#)
[#hcsn](#)

6:41 [Liam Farrell @drifarrell](#)
T2 and collecting/recording relevant/accurate data takes time from consultation [#hcsn](#)

6:41 [Elizabeth Hanes @EHanesRN](#)
I agree. RT [@Cascadia](#) T2 I worry that we are falling in love with data and missing out on qualitative aspects of health
[#hcsn](#)

6:41 [Kati Debelic @Katiissick](#)
[@mahoneyr](#) one physician I know has CSF & blood from his epidemic Tahoe flu from 1994 and on. This is invaluable for researchers. [#hcsn](#)

6:41 [tarynfortdoyle @tarynfortdoyle](#)
MT I worry that we are falling in love with data and missing out on qualitative aspects of health [#hcsn](#) [@Cascadia](#)

- 6:41 [Lauren @unxpctdblessing](#)
[@twirlandswirl](#) | saw. Hence why I said something. [#hcs](#)
- 6:41 [Matthew Jimenez MD @MLJimenezMD](#)
[#hcs](#) most data is dirty, corrupted; by observing a system, the observation changes the system. We reinforce our preconceived notions.
- 6:42 [Ruth Ann Crystal, MD @CatchTheBaby](#)
Interesting MT [@marksalke](#) [@Cascadia](#) The real promise of [#bigdata](#) the future of it, really, is personalization. The technology exists. [#hcs](#)
- 6:42 [David Harlow @healthblawg](#)
RT [@Cascadia](#) T2 I worry that we are falling in love with data and missing out on qualitative aspects of health [#hcs](#) [#hcs](#)
- 6:42 [Joe Murphy @Joejohnmurphy](#)
T2 To the extent possible, collect needed data from passive or existing sources to reduce burden of reporting. [#hcs](#)
- 6:42 [Sherry Reynolds @Cascadia](#)
[@Bristol_scaleMD](#): [@blancfang](#) agree. - would rather see data co-evaluted w/ patient & their preferences and values considered [#hcs](#)

6:42 [David Chou @dchou1107](#)

personal big data is coming with wearable technology so we will have even more data [#hcs](#)

6:42 [Nicholas Magers, RD @NicholasMagers](#)

[@CChappellMD](#) agree on [#EMR](#), much just a [#bigdata](#) land-grab with [#doctors](#) being used for data entry [#hcs](#)

6:42 [Elizabeth Hanes @EHanesRN](#)

RT [@MLJimenezMD](#) [#hcs](#) most data is dirty, corrupted; by observing a system, the observation chgs sys. We reinforce our preconceived notions.

6:42 [harriseve @harriseve](#)

Or docs need help-> MT [@marksalke](#): A2 if docs can't translate data into information for patient care then there is 2 much data [#hcs](#)

6:42 [HealthSocMed | #hcs @HealthSocMed](#)

Moving on to our final topic for tonight (T3) shortly! [#hcs](#)

6:42 [Faisal Qureshi @fqure](#)

[@CatchTheBaby](#) [@mahoneyr](#) yes, also data for data's sake is someone's revenue model, may not align w/ pt interests [#hcs](#)

6:42 [Sherry Reynolds @Cascadia](#)

Even in hard core cardiology only about 11% of all care is "evidenced based" [#hcs](#)

6:42 [Robert Mahoney @mahoneyr](#)

Probably an expectation component here. Some pts provide mountains of data but no useful pattern can be extracted.

[@EHanesRN](#) [#hcs](#)

6:43 [Joe Murphy @Joejohnmurphy](#)

T2 But if collecting secondary data, be sure of its quality. [#hcs](#)

6:43 [Kati Debelic @Katiissick](#)

Yep the tape recorders and floppy discs are getting out of date :-)
[#hcs](#)

6:43 [dr suzy hall @drsuzyyhall](#)

[@abrewi3010](#) [@timbigfish](#) Agree w pts having access to their data but also need ACCESS to their HCPs to interpret/prioritize the data
[#hcs](#)

6:43 [Annette McKinnon @anetto](#)

[@Bristol_scaleMD](#) Sometimes need context for the data. What looks bad to me may be great to someone else
[#hcs](#)

6:43 [Laurel Ann Whitlock @twirlandswirl](#)

[@Katiissick](#) ...so what should I do with these stone tablets, then?
[#hcs](#)

6:43 [Bill Wong @BillWongOT](#)
[@Cascadia](#) [@Bristol_scaleMD](#) [@blancfang](#) In some OT
assessments, clients put in their values/what they think. [#hcs](#)

6:43 [Tim C Nicholson @timbigfish](#)
And this tech says, "now do this.." RT [@dchou1107](#): personal
big data is coming...wearable technology..we will have even
more data [#hcs](#)

6:43 [Kati Debelic @Katiissick](#)
[@mahoneyr](#) patterns can be found if the cohort is homogenous
[#hcs](#)

6:44 [Elizabeth Hanes @EHanesRN](#)
Hm. RT [@mahoneyr](#) Probably an expectation component here.
Some pts provide mountains of data but no useful pattern can
be extracted. [#hcs](#)

6:44 [Alan Brewington @abrewi3010](#)
A2 data is only good as the patients medical literacy rate.
[#hcs](#)

6:44 [HealthSocMed | #hcs](#) [@HealthSocMed](#)
TOPIC 3 - What happened to concept of "gamifying" health?
Where is HC w/ incentivizing healthy behaviors? What's
working/not?Thoughts? [#hcs](#)

6:44 [Robert Mahoney @mahoneyr](#)

Seems like much of the useless information collect ends up being required for reimbursement, not patient care. [@fjure](#)
[@CatchTheBaby](#) [#hcs](#)

6:44 [Jennifer C / T1D @jenniferct1d](#)

[@mahoneyr](#) That's frustrating to both HCP and pt! [#hcs](#)

6:44 [Sherry Reynolds @Cascadia](#)

RT [@abrewi3010](#): A2 data is only good as the patients medical literacy rate. ^or how it is presented.. visualizations r powerful
[#hcs](#)

6:44 [Dana Lewis | #hcs @danamlewis](#)

T3 live at [#hcs](#) - is anyone still working on "gamification" of HC? Any progress on incentivizing healthy behaviors?

6:45 [Mark Salke @marksalke](#)

[@EHanesRN](#) [@MLJimenezMD](#) That is a brilliant observation.
[#hcs](#)

6:45 [April Foreman @DocForeman](#)

[@twirlandswirl](#) [@Katiissick](#) Ha! I've got some carrier pigeons so you can share records b/wn providers. [#hcs](#)

6:45 [David Chou @dchou1107](#)

RT [@marksalke](#) [@EHanesRN](#) [@MLJimenezMD](#) That is a brilliant observation. [#hcs](#)

6:45 [dr suzyy hall @drsuzyyhall](#)
[@anetto](#) [@Bristol](#) [scaleMD](#) Right! Data requires interpretation
[#hcs](#)

6:45 [Tim C Nicholson @timbigfish](#)
[@drsuzyyhall](#) [@abrewi3010](#) Absolutely. Access to their [#HCPs](#)
and to tools they can use at home to learn more abt what it
means to them. [#hcs](#)

6:45 [Ruth Ann Crystal, MD @CatchTheBaby](#)
[#hcs](#) [@HealthSocMed](#) [@danamlewis](#) T3?

6:45 [Nicholas Magers, RD @NicholasMagers](#)
Seems [#bigdata](#) could be used to monitor real outcomes and
see if in the ballpark of [#clinicaltrials](#). [#hcs](#)

6:45 [Liam Farrell @drifarrell](#)
RT [@mahoneyr](#) Seems like much of the useless information
required for reimbursement, not patient care. [@fquire](#)
[@CatchTheBaby](#) [#hcs](#)

6:45 [Elizabeth Hanes @EHanesRN](#)
Interesting perspective, anyway. Deep. RT [@marksalke](#)
[@EHanesRN](#) [@MLJimenezMD](#) That is a brilliant observation.
[#hcs](#)

6:45 [Kati Debelic @Katiissick](#)
Please define gamifying [#hcs](#)

6:45 [Elizabeth Hanes @EHanesRN](#)
RT [@danamlewis](#) T3 live at [#hcs](#) - is anyone still working on "gamification" of HC? Any progress on incentivizing healthy behaviors?

6:45 [David Chou @dchou1107](#)
Gamification will be a big part of therapy in myPOV [#hcs](#)

6:46 [Anne Stey @AnneMStey](#)
Public policy literature attests to decision "paralysis" due to information overload Providers=interpreters [#HCSM](#)
faculty.london.edu/sbotti/assets/...

6:46 [Robert Mahoney @mahoneyr](#)
Very frustrating for patients, who spend a lot of time collecting the info. Wish I knew how to use all of it. [@jenniferct1d](#) [#hcs](#)

6:46 [David Harlow @healthblawg](#)
T3 tons of apps using game theory - no clear 'winner' of patient mindshare. Most health apps not used for long enough. [#hcs](#)

6:46 [Kati Debelic @Katiissick](#)
RT [@BillWongOT](#): [@HealthSocMed](#) I think a gamifying approach is not quite necessary w/ motivated clients. [#hcs](#)

6:46 [Jennifer C / T1D @jenniferct1d](#)
T3 Prob with that is that it excludes pts who work sooo hard to control chron illness yet still struggle... No reward for the effort [#hcsn](#)

6:47 [Ginny Angert @GinPNP](#)
T3: I hate the work "gamifying" almost as much as "hack" related to [#healthcare](#). It's my (our) life, not a game! [#hcsn](#)

6:47 [Elizabeth Hanes @EHanesRN](#)
RT [@healthblawg](#) T3 tons of apps using game theory - no clear 'winner' of patient mindshare. Most health apps not used long enough. [#hcsn](#)

6:47 [Robert Mahoney @mahoneyr](#)
If healthy behavior leads to better health, should more incentive be needed? [@danamlewis](#) [#hcsn](#)

6:47 [Ruth Ann Crystal, MD @CatchTheBaby](#)
[#hcsn](#) T3: [@tonicforhealth](#) gamifies patient data collection- each screen has a different cute way of making data collection fun.

6:47 [Jennifer C / T1D @jenniferct1d](#)
T3 However it would engage many pts who otherwise wouldn't care about health. [#hcsn](#)

6:47 [Dan Goldman @danielg280](#)

A lot of people are working on gamification. Hard to do it right though. Will be intrstg to c if wearable devices create more interest [#hcsml](#)

6:47 [Liam Farrell @drifarrell](#)

RT [@jenniferct1d](#) T3 However it would engage many pts who otherwise wouldn't care about health. [#hcsml](#)

6:48 [T2D Research @T2DRemission](#)
[#hcsml](#)

6:48 [Elizabeth Hanes @EHanesRN](#)

Yes. RT [@drifarrell](#) RT [@jenniferct1d](#) T3 However it would engage many pts who otherwise wouldn't care about health. [#hcsml](#)

6:48 [Kati Debelic @Katiissick](#)

Re gamifying: technologic advances move too fast for apps and games. they become very quickly outdated. [#hcsml](#)

6:49 [T2D Research @T2DRemission](#)

Michael.Massing just sticking his head in before going back to clear from supper. [#hcsml](#)

6:49 [David Harlow @healthblawg](#)

[@GinPNP](#) not supposed to be a game. The idea is to use game theory to motivate healthful activities. V. Different. [#hcsml](#)

6:49 [Sherry Reynolds @Cascadia](#)

Gamification has a role (and reflects IT culture) but is a competitive model - health care change is often collaborative [#hcs](#)

6:49 [Ruth Ann Crystal, MD @CatchTheBaby](#)

[#hcs](#) T3: Also [@Medikidz](#) is a comics series with superheros that explain disease to pediatric pt bit.ly/1ji0vzF

6:49 [Alan Brewington @abrewi3010](#)

A3 we need more gamifying of HC. We are told HC is a commodity, if not sick why buy it. Gamifying would help change this concept [#hcs](#)

6:49 [Elizabeth Hanes @EHanesRN](#)

.RT [@Cascadia](#) Gamification has a role (and reflects IT culture) but is a competitive model - health care change is often collaborative [#hcs](#)

6:49 [Lauren Still @laurencstill](#)

"Gamification" hurts my head as much as "hacking" but [@habit](#) is doing great things. [#hcs](#)

6:49 [Kati Debelic @Katiissick](#)

Gamify: can be good for changing behaviors, like weight loss. I love my fitbit, and myfitnesspal to keep me on track [#hcs](#)

6:50 [Ginny Angert @GinPNP](#)
[@healthblawg](#) Yea I know! But it implies a trick instead of incentivizing. I just wish we had a different name for it! [#hcs](#)

6:50 [Nicholas Magers, RD @NicholasMagers](#)
Often see those who are [#heathy](#) use [#wearables](#) & [#data](#) to improve...those with chronic conditions can be poor responders [#hcs](#)

6:50 [April Foreman @DocForeman](#)
[@JBBC](#) I don't think I have...Hm. I have been taking advantage of natural limitations in the brain like... [#hcs](#)

6:51 [Robert Mahoney @mahoneyr](#)
As long as gamifying doesn't lead to more messages on Facebook from patients inviting me to Candy Crush or FarmVille. [#hcs](#)

6:51 [April Foreman @DocForeman](#)
[@JBBC](#) How your limbic system regulates the four "Fs" and doesn't like to do more than 1 at a time. [#hcs](#)

6:51 [Megan Ranney MD MPH @meganranney](#)
Yup. Need both. RT [@Cascadia](#): T2 I worry that we are falling in love with data and missing out on qualitative aspects of health [#hcs](#)

6:51 [Mark Salke @marksalke](#)

A3: Gamification provides incentive to change behavior. It is perfectly suited to HC application. [#hcs](#)

6:51 [Elizabeth Hanes @EHanesRN](#)

A3: Gamifying could be collaborative. An app specific to ur practice to incentive pts re healthy behaviors, eg. [#hcs](#)

6:51 [Lauren Still @laurencstill](#)

Seriously [@habitrgg](#) has a great community to help people develop good habits, is social, networked, [#opensource](#) and all that stuff. [#hcs](#)

6:51 [Laurel Ann Whitlock @twirlandswirl](#)

[@mahoneyr](#) Dude, I was all about Mafia Wars back in the day. [#hcs](#)

6:51 [Constance P @Bristol_scaleMD](#)

[@Katiissick](#) and I've seen things like fitbit stimulate "healthy" competition amongst ppl's friends/family [#hcs](#)

6:51 [Ruth Ann Crystal, MD @CatchTheBaby](#)

[#hcs](#) T3: re incentivizing healthy behaviors, [@DietBet](#) is pretty cool. Ppl put \$ in the kitty and who ever gets to wt loss goal wins the pot

- 6:51 [Alan Brewington @abrewi3010](#)
A3 employers use gamifying techniques in order to try & bring down costs. Trouble is usually less the 5% of employees participate. [#hcsn](#)
- 6:52 [Elizabeth Hanes @EHanesRN](#)
Agreed! RT [@marksalke](#) A3: Gamification provides incentive to change behavior. It is perfectly suited to HC application. [#hcsn](#)
- 6:52 [April Foreman @DocForeman](#)
[@JBBC](#) So, if someone is really aggressive in my office, in crisis, I have them eat something w/ sugar and fat (candy bar, e.g.) [#hcsn](#)
- 6:52 [Robert Mahoney @mahoneyr](#)
Pics or it didn't happen. [@twirlandswirl](#) [#hcsn](#)
- 6:52 [T2D Research @T2DRemission](#)
[@Katiissick](#) My guilty pleasure as a gamification skeptic is Pact: bets on meeting one's goals. Uses MyFitnessPal for data entry. [#hcsn](#)
- 6:52 [harriseve @harriseve](#)
Then there's academic med-OY!@Cascadia [@CatchTheBaby](#)
[@mahoneyr](#) data 4its own sake= revenue model; may not align w/ pt interests [#hcsn](#)

6:52 [Laurel Ann Whitlock @twirlandswirl](#)
A game or light competition can be good motivation, but can also lead to unhealthy fixation. (Says she with OCD....) [#hcs](#)

6:52 [April Foreman @DocForeman](#)
[@JBBC](#) W'in 20 min. they're digesting, so their fight or flight response is inhibited. [#hcs](#)

6:52 [Mark Salke @marksalke](#)
A3: Something intrinsic about reward and competition that makes makes meeting goals easier. [#hcs](#)

6:53 [Elizabeth Hanes @EHanesRN](#)
HAH! MT [@NicholasMagars](#) RT [@mahoneyr](#): As long as gamifying doesn't lead to more msgs on FB frm pts inviting me to Candy Crush etc. [#hcs](#)

6:53 [Joe Murphy @Joejohnmurphy](#)
T3 Terms like hack and gamify cause some to bristle but also bring needed attention to some new ideas. [#hcs](#)

6:53 [Sylvia English @blancfang](#)
[#hcs](#)

6:53 [Robert Mahoney @mahoneyr](#)
I guess we think of statisticians for info collection and librarians for info access. New role? [@angspenc](#) [@HealthSocMed](#) [#hcs](#)

6:53 [David Harlow @healthblawg](#)
[@GinPNP](#) yes, well, there are plenty of language issues. Let's start w patient v consumer v. ??? [#hcsn](#)

6:53 [April Foreman @DocForeman](#)
[@JBBC](#) When that happens, then they can think clearly (something they can't do when high fight/flight arousal is happening). [#hcsn](#)

6:53 [Elizabeth Hanes @EHanesRN](#)
You're right. RT [@Joejohnmurphy](#) T3 Terms like hack and gamify cause some to bristle but also bring needed attention to some new ideas. [#hcsn](#)

6:53 [Kati Debelic @Katiissick](#)
[@T2DRemission](#) yeah data entry me too, and keep the goal in mind. I've gone down 45 lbs with MyFitnessPal, with more to go. [#hcsn](#)

6:54 [Sherry Reynolds @Cascadia](#)
Most fitness apps don't use current motivational theory [npr.org/blogs/health/2...](#) % many sell your data [lifehacker.com/lots-of-health...](#) [#hcsn](#)

6:54 [April Foreman @DocForeman](#)
[@JBBC](#) Do something similar in an insomnia intervention for combatting racing thoughts. Audio books b/c of limits in... [#hcsn](#)

6:54 [Lauren Still @laurencstill](#)
[@fquire](#) I know, but I never see another dev in a [#hcs](#) chat pushing those names. I think it's misleading. [#hcs](#)

6:54 [Elizabeth Hanes @EHanesRN](#)
Right! RT [@BillWongOT](#) RT [@marksalke](#): A3: Something intrinsic about reward and competition that makes meeting goals easier. [#hcs](#)

6:54 [Bill Wong @BillWongOT](#)
[@marksalke](#) yes! My OT used intrinsic rewards as a means to get me to work on my personal OT goals. [#hcs](#)

6:55 [April Foreman @DocForeman](#)
[@JBBC](#) How many things you can listen to at once (1.6 I believe ha!). A good audio book keeps you from "hearing" your racing thoughts. [#hcs](#)

6:55 [Steve Sisko @ShimCode](#)
"The value from a Tweetchat doesn't stop at the end of the hour's live discussion" [ow.ly/wYZqK](#) [#hcs](#)

6:55 [Robert Mahoney @mahoneyr](#)
That could be creepy: "Dr. Smith would like to invite you to Eat More Broccoli". "Nurse Jones likes this." [@Cascadia](#) [#hcs](#)

6:55 [harriseve @harriseve](#)
Riight? MT [@healthblawg](#): T3 tons of game theory apps; no clear 'winner' of patient mindshare. Most health apps not used 4long enough [#hcsn](#)

6:55 [HealthSocMed | #hcsn @HealthSocMed](#)
Time to wrap up this week's [#hcsn](#) chat! Last thoughts for the week ahead?

6:56 [Robert Mahoney @mahoneyr](#)
We have librarians round with us from time to time in the hospital, but more to help with evidence discussions
[@angspenc @HealthSocMed #hcsn](#)

6:56 [Bill Wong @BillWongOT](#)
[@jchevinsky](#) but isn't a show like the Biggest Loser considered as a game? [#hcsn](#)

6:56 [Kati Debelic @Katiissick](#)
RT [@jchevinsky](#): T3 Some people don't like to look at their health as a 'game' perhaps this is smthing that might be best left 4 peds [#hcsn](#)

6:56 [Laurel Ann Whitlock @twirlandswirl](#)
[@jchevinsky](#) It would have to be only for factors you can truly control - exercise, good food, etc, not things like blood sugar, etc. [#hcsn](#)

6:56 [Sherry Reynolds @Cascadia](#)
[@mahoneyr](#) lol well you could proactively prescribe some mobile games or suggest apps you think might benefit them
[#hcs](#)

6:56 [Robert Mahoney @mahoneyr](#)
Ok, so it happened. [@twirlandswirl](#) [#hcs](#)

6:57 [Kati Debelic @Katiissick](#)
[@jchevinsky](#) I think apps and games should be used by pts who choose to do so and not be forced into using [#hcs](#)

6:57 [T2D Research @T2DRemission](#)
[@jchevinsky](#) Pretty much my objection: I'm going to work harder for badges than I am for glucose levels that don't corrode my body? [#hcs](#)

6:57 [Jennifer Chevinsky @jchevinsky](#)
[@BillWongOT](#) It might be... but while it may work well for some, might be considered demeaning for others [#hcs](#)

6:57 [Lauren Still @laurencstill](#)
[@danielg280](#) there are apps to out fitbit others, and level up with good habits. The interest is there, the platforms available.
[#hcs](#)

6:57 [Laurel Ann Whitlock @twirlandswirl](#)
[@mahoneyr](#) I have a close friend who always says "jpg or it didn't happen." He's a nerd. (I'm totally not.) (Okay, maybe a little.) [#hcs](#)

6:58 [Heather Z @ZHeatherChamp](#)
A2: from the [#RareDisease](#) side, any and all data is needed! My doc says, "We just don't have the data on [#PTEN](#)", etc. [#hcs](#)

6:58 [Kati Debelic @Katiissick](#)
RT [@ZHeatherChamp](#): A2: from the [#RareDisease](#) side, any &all data is needed! My doc says, "We just don't have the data on [#PTEN](#)", etc. [#hcs](#)

6:58 [Heather Z @ZHeatherChamp](#)
[@HealthSocMed](#) A3: what does gamify mean? [#hcs](#)

6:58 [harriseve @harriseve](#)
Indeed often puts me 2sleep MT [@DocForeman](#): [@JBBC](#) A good audio book keeps you from "hearing" your racing thoughts. [#hcs](#)

6:58 [Robert Mahoney @mahoneyr](#)
Seems awfully anti-GIF, if you ask me. [@twirlandswirl](#) [#hcs](#)

6:59 [Kati Debelic @Katiissick](#)
[@ZHeatherChamp](#) i agree and applies to underfunded neglected diseases as well [#hcs](#)

6:59 [Lauren Still @laurencstill](#)
I really just don't get people. It's like everyone just wants to say "hey, we tried" without seeing that we actually did, and can.
[#hcs](#)

6:59 [T2D Research @T2DRemission](#)
[@twirlandswirl](#) I have to make a small demurral here. Some behaviors can predictably control blood sugar in at least some patients. [#hcs](#)

6:59 [Alan Brewington @abrewi3010](#)
Terms like hacking don't matter much. Are the results helping a patient should be the only measure of success. [#hcs](#)

7:00 [Kati Debelic @Katiissick](#)
RT [@abrewi3010](#): Terms like hacking don't matter much. Are the results helping a patient should be the only measure of success. [#hcs](#)

7:00 [Ginny Angert @GinPNP](#)
[@jchevinsky](#) Yes! And even in pediatrics will need to manage the semantics of it bc who wants to offer up their kiddo to a "game"? [#hcs](#)

7:00 [Liam Farrell @drifarrell](#)

T3 like most Rxs, gamification not for all, but might help in selected cases [#hcs](#)

7:00 [HealthSocMed | #hcs](#) [@HealthSocMed](#)

That's a wrap on another awesome [#hcs](#) chat! Thanks, all!
See you again next Sunday at 8pm CT - and remember to DM or [@HealthSocMed](#) topics!