

Social Media in Healthcare: A Professional and Ethical Analysis

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One click... That is all it takes for a message to spread, for a trend to set, and for an idea to inspire millions. One click... That is all it takes for misinformation to be shared, for trust to be broken, and for careers to be over. One simple click is all you need to go from zero to hero or from admired to cancelled. That is the power of social media, a double-edged sword that can either open doors to opportunity or close them forever.

Instagram. Facebook. TikTok. The list goes on and on... These social media platforms have revolutionized how people connect and collaborate in this day and age, especially in the world of healthcare. They are not only used by healthcare professionals to share reliable medical information, promote health awareness, and build professional communities, but also to reach patients beyond the walls of clinics and hospitals in more accessible ways. However, as social media becomes more integrated into healthcare communication, ethical concerns begin to surface, such as the spread of misinformation, violations of patient confidentiality, and challenges in maintaining professionalism. This paper will explore both the benefits and drawbacks of social media use in healthcare and examine how physician assistants, in particular, can responsibly engage online while upholding the ethical standards that their license represents.

With billions of daily users worldwide, social media is considered to be one of the largest channels for health education. What sets it apart from traditional channels like print or broadcast media is its accessibility. Health resources and advice are just within pocket reach and available anytime, anywhere. Whether it is a 30 second TikTok explaining how to check your blood pressure or a quick Instagram story on flu prevention, providers are now able to educate their patients at home, on the train, or even in another country. Some platforms like YouTube and Twitter even have built-in live streaming features that allow providers to interact with their patients in real-time and answer any questions that they may have, creating a more dynamic

educational experience. Given this level of convenience, it is no surprise that nearly 85% of providers recognize the value that social media brings to their practice (Chen & Wang, 2021).

Social media has also transformed the way healthcare professionals network and learn with one another. Platforms like Twitter and LinkedIn have become indispensable tools for continuing medical education and interdisciplinary communication. These interfaces have allowed clinicians to join virtual journal clubs, share commentary on publications, and access conference updates through live-streamed sessions. In addition, they promote intellectual exchange across all levels of clinical experience, encouraging lifelong learning and helping providers stay up to date with best practices (Ladeiras-Lopes et al., 2020).

Along with its role as a teaching tool, social media can be used to address and bring awareness to urgent public health issues. Take the case of organ donor shortage, for example. In 2015, it was reported that only 29,532 people out of over 122,000 on the US organ transplant waiting list received a transplant (Gowri et al., 2016). This disproportionate gap between supply and demand for donors has, in turn, led to the rise of organ trafficking worldwide, with the World Health Organization (WHO) linking 5-10% of all transplants in 2015 to illicit practices (Ambagtsheer et al., 2016). But here's where social media makes a difference. In 2016, Facebook launched a feature on their platform that allows its users to both sign up officially as organ donors (via a direct link to their state's organ registry) and publicly share that status on their profiles. On the first day of launch, there was a significant spike in the number of new donor registrations (about 13,000), which marks a 21-fold increase compared to the typical daily rate (Gowri et al., 2016).

In addition to supporting health education and public awareness, social media is becoming an important tool in the everyday operations of healthcare delivery. For example,

clinics are able to post direct links to digital self-scheduling systems on their social media platforms and have the patient book appointments at their own convenience. This approach not only helps to reduce no-show rates and scheduling barriers for hesitant or first-time patients but also improves clinic efficiency by lightening the administrative workload. On top of that, clinics can use social media to provide updates about working hours and promote vaccination campaigns and health screening events (Woodcock, 2022).

Despite all the positives of social media in healthcare, it also brings about serious ethical concerns that cannot be overlooked. One of which is the rapid spread of misinformation. In today's digital landscape, anyone with a smartphone and a social media account can share medical advice without a professional medical background. This unchecked access has contributed to the spread of harmful misinformation. For example, social media-driven trends such as the "Tide Pod Challenge" and the "Benadryl Challenge" have resulted in serious injuries and fatalities among children and young adults (Jeyaraman et al., 2023). False news was 70% more likely to be retweeted than trustworthy news, and real information took six times longer to reach the same audience (Jeyaraman et al., 2023). This issue is especially concerning in healthcare, where emotionally driven but misleading posts often outperform evidence-based information. Similarly, during the COVID-19 pandemic, false claims about vaccines and treatments circulated widely on social media with a review showing that misinformation was present in anywhere from 0.2% to 28.8% of COVID-19 related posts, contributing to public confusion, fear, and harmful behaviors (Jeyaraman et al., 2023). Although it can be difficult to distinguish between reliable sources and opinion or manipulation, as providers, if we do not engage with these platforms using evidence-based information and promote digital literacy to our patients, we risk leaving the public vulnerable to harmful misinformation.

Another ethical concern with social media use in healthcare is the potential violation of patient confidentiality, especially as digital platforms are becoming more integrated into medical education and clinical practice. Jeyaraman et al. notes how, for educational purposes, healthcare professionals often discuss a patient's case by removing patient information. However, factors such as rare conditions, unique case scenarios, visible injuries, and identifiers like scars and tattoos can still reveal the patient's identity. Although this action may be unintentional and not malicious, it can still lead to the violation of the Health Insurance Portability and Accountability Act (HIPAA) and further erode the patient's trust in their provider. Furthermore, Jeyaraman et al. also points out how unique social media features, such as live streaming, disappearing stories, and the ability to share stories, make it challenging for clinicians to fully control or predict the extent to which their content may spread without proper training. Therefore, they advocate for the development and enforcement of robust institutional policies, including clear guidelines on informed consent, confidentiality, content monitoring, and accountability for unprofessional conduct to avoid ethical and legal issues. Assuming a post is harmless because it lacks a name is not enough, for we must recognize that protecting patient confidentiality is not optional, but a fundamental part of our responsibility as healthcare professionals.

Lastly, professionalism in the digital space remains a vital concern as healthcare providers increasingly engage with social media. A systematic review study conducted by Guraya et al. (2021) explored what medical professionals and students would post and engage in that would affect their professional identities. This included medical and other health students, physicians, program directors, and other faculty. The study discussed how many unprofessional behaviors among medical professionals are categorized as high-risk-to-professionalism events (HRTPE). These events include posting identifiable patient demographics, radiological images,

or inappropriate images of colleagues. Additionally, it was found that the most recurring content posted included posts about work environment (58%), prejudicial language (29%), and cyberbullying (11%). The blurred boundaries between professional and unprofessional lives can lead to the intertwining of medical professionals' personal and work relationships, ultimately harming the reputation of the healthcare professionals and their institution.

Given this impact, it's important to remember that online conduct reflects not just on the individual but on the profession as a whole. This is especially significant considering the core principles of the PA profession, which emphasize professionalism, ethics, and accountability. Acting responsibly online not only protects the reputation of individual PAs but also fosters broader trust in the profession. While social media offers valuable resources, its impact depends on how professionals use it. Guraya et al. (2021) emphasized the need for digital professionalism training, calling for strict policies and formal education to prevent harm. According to another 2024 peer-reviewed study, many PA programs have started implementing structured guidelines and formal education on digital professionalism (Cotgreave & Wolf, 2024). PAs are trained to avoid sharing patient information, even unintentionally, and seemingly harmless posts like pictures of clinical settings or general case descriptions can still breach HIPAA. In a survey of 497 PA students, around 66% of the students admitted to posting about alcohol despite 90% of the programs stating clear guidelines on professionalism. More specifically, clinical year students posted more alcohol related content compared to didactic students, which demonstrates that vigilance decreases as students progress into the PA program. Furthermore, 95% of PA students reported having a social media account, but only 52.5% were aware of the social media policy, and a staggering 44.7% didn't even know if a policy existed (Cotgreave & Wolf, 2024). Clearly, a disconnect still exists in the effectiveness of the current policies on professionalism when using

social media. Beyond written policies, this disconnect calls for more continuous training that aligns with AAPA ethical standards throughout the PA education. By recognizing the risks of careless use, PAs and students can better uphold professional integrity online.

All in all, social media serves as a powerful tool in modern healthcare that presents both challenges and opportunities. On one hand, it can enhance health education, raise awareness for public health issues, and support clinical collaboration. On the other hand, it requires careful navigation of ethical concerns, particularly regarding patient confidentiality, trust, accurate information sharing, and professional boundaries. PAs must follow a standard of patient-centered care through professionalism and respect, whether by avoiding social media connections with patients or setting clear boundaries. Their online presence should reflect the same ethical standards they follow in clinical practice. PAs should demonstrate integrity and remain HIPAA-compliant as social media evolves. Doing so protects patient trust and upholds the values of the PA profession because sometimes, one click is all it takes to either build that trust or break it.

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