

Physician CONNECTION



Considerations with Negative Social Media Posts

By Linda J. Hay

Deciding how to respond to negative social media, has become a more pressing issue for physicians lately. Consider the following case study:

Plastic surgeon Mark Larson, M.D., had a thriving business in early 2003, and he re-invested a large portion of his profits into his business.

Dr. Larson believed that office-based procedures were the wave of the future, and he retained marketing specialists to initiate traditional and word-of-mouth advertising to promote the practice. Initiatives included offering limousine service to patients on the day of surgery and attracting “celebrity” clients with publicity.

Dr. Larson performed significantly more surgeries, and his business grew extensively over the next few years. There was also a marked increase in complications associated with these surgeries and numerous revision surgeries were necessary. Consequently, Dr. Larson faced a growing number of malpractice claims.

Dr. Larson’s patient growth slowed significantly in 2005. Therefore, in an effort to contain costs, he modified the limousine service so drivers would pick up and take home more than one patient at a time. This practice ended up being problematic when two patients struck up a conversation in the limo, compared notes and learned that both were going back for revision surgery.



Shortly thereafter, the patients jointly hired a lawyer and filed malpractice lawsuits against Dr. Larson. The lawsuits claimed the patients did not fully understand the lengthy informed consent forms, and the clinic did not give them enough time to process the forms’ content

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before surgery. The lawsuits also alleged Dr. Larson:

- Made errors during surgery
- Improperly used and cared for the surgical equipment
- Did not provide proper postoperative care

Physician’s Problems Escalate

As claims mounted, Dr. Larson became embittered—both emotionally and economically—with being named a defendant in the lawsuits. Dr. Larson’s negative attitude filtered through to his patients and staff alike.

Compounding Dr. Larson’s problems was the fact that some patients had reported him to his state disciplinary board for similar complaints. The board looked unfavorably at the mounting lawsuits as they investigated the complaints.

During this time, Internet rating sites began to rise in popularity. Many people developed their own sites and/or started using rating sites to tout personal opinions, gather information, and publicize issues.

Unfortunately for Dr. Larson, the rating sites provided a platform for

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disgruntled clients to anonymously post their views. One physician rating site contained the following about Dr. Larson:

- “He usually doesn’t tell the truth.”
- “He is just in it for profit.”
- “He ruined me.”
- “Stay away.”
- “All he wants is more patients, so he can make boatloads of money.”
- “He permanently damaged me; he is deplorable.”

In addition to the rating sites, an anonymous individual website, entitled BewareDrLarson.com, compiled negative public information about Dr. Larson. It included the information about the lawsuits against him, a link to the state disciplinary site investigation and posts by visitors to the site. Another website devoted to “bad plastic surgeons” listed Dr. Larson and included links to the negative information about him.



Eventually, more than 15 malpractice suits were filed against Dr. Larson. The state disciplinary board also suspended his license to practice medicine for 30 days. Not surprisingly, Dr. Larson’s practice shrunk significantly, his professional reputation and career were significantly damaged, and the experience took a heavy financial and emotional toll on him.

Risk Management Insights

While Dr. Larson’s problems were extreme and stemmed from lawsuits against him, the widespread access to the internet served as a breeding ground for ongoing harm to his professional reputation. Even today, a Google search of Dr. Larson pulls from 10-to-15-year-old sites.

The harm from negative social media can be enormous. There are numerous ways to attempt to combat harm from negative postings, but there is no simple solution.

First and foremost, focus on prevention. While it seems like a basic premise, sensitivity to the patient’s needs, concerns about patient privacy, a caring and welcoming staff, diplomacy in dealing with financial matters, and an overall attitude of care, honesty, and sincerity reduces the risk of patient complaints. This in turn, reduces the likelihood of negative online commentary.

Marketing efforts must be closely monitored by the practitioner. Marketing specialists might not be aware of the potential risk issues at play in a medical practice. Therefore, it is up to the practitioner to ensure that the practice doesn’t make claims it cannot meet.

Dr. Larson’s idea of providing a car service was a good idea, but it became problematic when patients started to share rides. What’s more, the use of a limousine service, combined with celebrity endorsements, may have fueled negative comments about the doctor because it seemed he was more concerned with making money than caring for patients.

When a problem occurs, such as a surgical complication, **it should be dealt with honestly and promptly.** Many resources exist to help a practitioner deal with an incident, including calls to lawyers, insurance

carriers, or inquiries/use of networks, publications and presentations through medical societies or risk management organizations, such as the American Society for Healthcare Risk Management (ASHRM).

Rating sites provide a platform for disgruntled people to express their views.

In Dr. Larson’s case, he may have viewed disgruntled patients or malpractice claims as a cost of doing business. This approach takes away from prevention and dealing with problems early. **An integral part of prevention is involving staff members** who have the ability to sensitively deal with dissatisfied patients.

Practitioners must create an atmosphere where constructive criticism and commentary is welcome, and patients are encouraged to share complaints directly with the physician and staff (rather than posting them on a website). It can also be beneficial to follow up with phone calls to patients post-procedure, conduct satisfaction surveys and train staff to recognize dissatisfied patients.

Collecting on unpaid bills can also become an issue. While the physician has every right to pursue unpaid fees for work performed, aggressive collection efforts can make patients irate. Angry patients tend to be the most vehement and vicious in postings. Collection matters should be handled in a sensitive manner with practitioner oversight.

Physicians must regularly monitor information that appears about them on the internet. When a physician finds negative comments, he or she should evaluate them and determine:

- Is there a preferred manner for responding?
- What is the method to report inaccurate information?
- What is the impact of the posting?

Responding to Social Media Posts

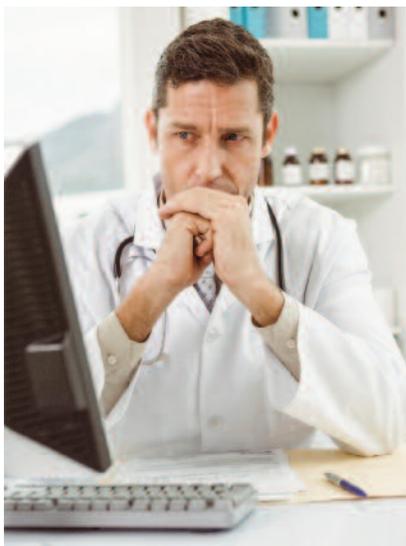
It is essential to be very cautious in responding to negative comments. Consider the source, their nature and context, the credibility of the author and the site, the language used and whether the criticism is constructive. Consider also the number of negative comments and whether they are similar in nature. Silence may be the best course in many situations; responses may prompt ongoing arguments that only serve to draw more attention to the criticism. Should a physician decide to respond, the following guidelines may be beneficial:

- Enlist an objective person to review any response before it is sent or posted.
- Do not respond in anger.
- Keep responses short, polite and to the point.
- Use responses as opportunities to focus on the positives.

Physicians must regularly monitor and evaluate comments about them on the Internet.

For example, a post might read: “We are sorry that Mr. X had an unpleasant experience in our office. We strive to make every patient experience a positive one, and we will work to correct the problems related to this complaint.”

A good practitioner will learn how Internet searches work and how to keep positive materials and posts at the top of the search engine results. If faced with extremely negative



postings, the physician should determine if they can be taken down or pushed to the bottom of a search list. This includes assessing whether the site has a protocol for complaining about offensive material.

There are companies and consultants who can assist with maintaining a more positive, controlled presence on the Internet. In addition, many of these consultants can recommend steps to bolster damaged online reputations.

In cases where posted information is extremely damaging, an attorney can be retained to assess if information posted could be the basis for a claim. However, these avenues are more costly and may not achieve the desired result.

Example

The following example of a physician (names have been changed) who received a negative review on Yelp shows how easy it is to fall into a mudslinging trap with a disgruntled patient:

Yelp Review

October 12, 2012

One star (out of five)

J.T.—*Dr. Pilson is a bit aloof.*

I went there to get a couple of benign small growths removed. Rather than just remove the growths, she kept having me do other stuff prior to having them removed. Long story short, after many visits, I spent more than \$1,000 dollars and did not have one growth removed. On top of that, she was estimating some other work I should have done, to the tune of over \$5,000. Horrible experience.

May 31, 2013

James H.—*I don't think the complainer was actually Dr. Pilson's client—the whole story sounds ludicrous to me. She was not even in the office at that time because she was out with a broken hip and in physical therapy. I have been going to Dr. Pilson and her team for 20 years or so. If you don't have a doctor, or you are thinking of switching, look no further. She is the best! Everyone she has ever had on staff has always been TOP NOTCH! I think Alicia has been with her the whole 20 years I have been going—Becky has been there maybe half that long—Chris, less than 5 now. Like I said, EVERYONE I have ever met and worked with of her staff are the best and the brightest. Highly recommended—hands down!*

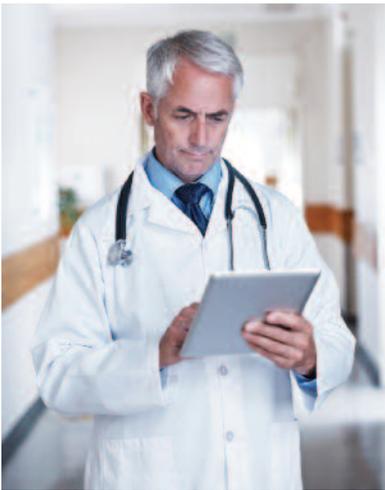
June 17, 2013

Comment from Business Owner, Dr. Pilson—*James, thank you so much for your comment and compliments to my office and team. I'm happy to hear of such positive experiences you've had with us! We strive to do the best for our patients and we value your loyalty and feedback. You've been a patient for a long time, and we appreciate that you have chosen us, and we love seeing you! I am*



Scan to visit the risk management section of psicinsurance.com/physicians

grateful to have a wonderful team who is dedicated to excellent care, and we are committed to making your visits comfortable and relaxing. It's true that I was out of the office from August to mid-October healing from a broken hip and leg, so J.T.'s feedback is a bit confusing to me.



June 30, 2013

Updated review from J.T.—*In response to James H's comment that tries to discredit me: What is ludicrous is that you do not even know the exact dates of my appointments there, yet you make assumptions and declare that she was not there during that period. So, your comment makes no sense in trying to discredit me, and it actually just reads more like a sales pitch. I am not a complainer. I am entitled to my*

negative review just like everyone else. My intention was to simply post my experience so that it might help someone. In response to Dr. Pilson, you also do not know the dates of my appointments. You were most certainly there. I have recently, finally, found a good doctor that I plan to keep. I was hopeful that you would become my doctor, but things obviously did not work out, and I had to continue the search. Know that my intentions, with my reviews, are never to hurt anyone, but to share my experiences so that they may help others. I believe my comments are both accurate and true.

In this case, Dr. Pilson might have been better served to post a simple, positive response that did not escalate the situation with further negative comment. For example: "We are sorry that your experience at our office was not a positive one, and that we missed the opportunity to resolve your concerns at that time. My staff and I will address the issues raised and work to improve patient satisfaction and the overall patient experience at our office." Dr. Pilson's ringing endorsement of James' post (combined with the unusually detailed and disputed facts) only exacerbated the situation.

Remember, maintaining a good reputation, online and otherwise, takes time and effort. Good practitioners want to claim

ownership of their online reputations. This involves learning how online searches work and how to positively

Taking steps to build a positive online reputation helps to counterbalance negative posts.

use social media to keep current and positive reviews and commentary fresh in the public eye. Physicians must be cautious and thoughtful when addressing negative posts.

Busy practitioners without the time or staff to learn, monitor, and oversee the doctor's online reputation should consider use of consultants with more expertise to help with this process. Taking active steps to build a positive online reputation helps to counterbalance negative postings.

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