How can social media be useful to you?

(Or is your learning network fit for purpose?)
@damian_roland

How can social media be useful to you? (Or is your learning network fit for purpose?)

Aidan Baron
@aLittleMedic

Replying to @ketaminh

@ketaminh @LizCrowe2 @Damian_Roland @DocJohnHinds

#FOAMed is the friend you always wished you could call at midnight to ask for help.
DISCLAIMER

I am a social media editor for Pediatric Research (@PED_research)

@damian_roland
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I use Twitter…

A lot.
I just have a great idea! A theory of relativity
$E = mc^2$
Read my post here:
alberteinsteinteories.blogspot.com
Thinking of the last seminal paper/report published relevant to you…

A) There’s been a seminal paper in my specialty? I haven’t looked at an article for years.

B) Can’t quite remember what it’s about, but it’s in my e-mail inbox to read.

C) I’ve read a blog on it, but I don’t quite understand all the science and not sure what it’s impact is going to be.

D) I knew about it within 12 hours of it being published and was able to discuss it’s merits and limitations at the next available teaching session.
You read a great paper/report/presentation on your area of interest last year but can’t remember the citation. Do you…

A) Scribble what you can remember of its title on your white board and leave it there until it eventually comes back to you.
B) Spend 60 minutes googling it and get distracted by a random YouTube clip that catches your eye.
C) Contact your librarian to perform a literature review based on suggested MeSH headings and keywords.
D) Ask your online community of practice.
You’ve been given the publication date for the most important paper/report/presentation of your career to date. Do you…

A) Pat yourself on the back and wait for the compliments to fall through your letter box.

B) E-mail a few colleagues to let them know you’ve been successful.

C) Tweet the title and link to your paper/presentation on day of the release.

D) Contact a well-known blog and/or podcaster in your field of research and invite them to discuss your paper on the day of release. Create an infographic describing your results and set up a Twitter journal club review.
Digital Network Maturity

Were you:

Mostly A  You might want to consider joining the 21st century.

Mostly B  You are organized (to an extent) but aren’t using tools effectively.

Mostly C  You are aware of tools available but aren’t maximizing your possibilities.

Mostly D  You are a digital learning network guru!
“MD degree may not teach doctors how to tweet….”

Photo by freestocks.org on Unsplash
Published Evidence
Clinical Guidelines
National Policy

Personal Practice

Photo by Alex Radelich on Unsplash
Published Evidence
Clinical Guidelines
National Policy

Knowledge Translation Void

Personal Practice

Photo by Alex Radelich on Unsplash
Published Evidence
Clinical Guidelines
National Policy

Knowledge Translation Void
Conventional Methodologies
Personal Practice

Photo by Alex Radelich on Unsplash
Knowledge Translation Void

Published Evidence
Clinical Guidelines
National Policy

Conventional methodologies

Collaborative learning networks

Personal Practice

Photo by Alex Radelich on Unsplash
Free Open Access Medical education
FOAM ≠ #FOAMed
ALERT!! This group of devotees converged and recommended: using #NeoEBM as an umbrella term to tag content for the global community interested in promoting evidence-based neonatal practice, and #foamneo to tag free-open-access content. We’ll try to adhere—let’s see if it sticks!
# neoEBM Cumulative Users

Source: Symplur
#neoEBM Tweet Activity

![Graph showing tweet activity over time]
#NeoEBM Twitter Cloud
NOECO

A framework for reporting research in healthcare social media

The PICO for Networks

Network
Example: Twitter or Facebook

Object
Example: Hashtags or post sentiment analysis

Engine
Example: Symplyr or Semantria

Comparison
Example: Regular distribution vs. clustering in Twitter or Sentiment change before and after an event

Observation
Example: Twitter users are clustered around few nodes or sentiment in a community changed after an event

Roland, Spurr & Cabrera
WestJEM
Digital Communities
rhizome
Digital Communities of Practice

- Curiosity
- Curation
- Celebration
- Collaboration
- Creation
- Cultivation

rolobotrambles.com/pathtofoam
@damian_roland
EMS
Lavatory Learning
CPD whilst having a wee!

No. 1 - July 2014

Welcome to the first “Lavatory Learning”.
We’ve collected some “things we didn’t know last month” on one-page: designed for the back of the loo door.

This is intended as a WAST community production - please send us something you’ve learned this month that you’d like to share.

Paediatric vomiting - what does it really mean?

This is a much-shortened version of Dr Natalie May’s post on “emesemantics and vomiting in kids” at the fabulous St Emlyn’s Blog - www.stemlynsblog.org - and is used with Natalie’s kind permission. Thank you!

Via Linda Dykes @mmbangor
You Snooze, You Lose? #smaccUS The Child with Altered Consciousness

As a part of the #smaccMINI workshop back in Chicago in 2015, I spoke about the approach to the child with an altered conscious level. The podcast is below along with a brief summary of the talk. The guidance below...

READ MORE

All the King’s Horses… difficult conversations with children in critical care. St.Emlyn’s.

All the king’s horses and all the king’s men Couldn’t put Humpty together again1. This blog tackles a really challenging topic in our theme around communication and wellbeing2–4. How do we approach difficult conversations with children in critical care and…
“Share your knowledge. It is a way to achieve immortality.” – Dalai Lama XIV

TIME CRITICAL TRANSFER

A pre-alert is made for a 5-year-old boy who is screaming in pain complaining of a sudden onset headache. His GCS drops during assessment...
This is the 53rd #WILTW

This week I spent time at two conferences with a theme of spotting 'sickness' in patients. The first was the Rapid Responses Conference, dedicated to developing new systems to identify deteriorating patients in hospital, and the second Sepsis Unplugged highlighting the importance of recognising sepsis.

There is a challenge of being able to decide which patients, child or adult, need further investigation and treatment, and which don’t. In the Rapid Reponse Conference (#METConf15) Paediatric Early Warning Systems (PEWS) were an area of discussion.
Use of a Paediatric Sepsis Screening and Action Tool

Dr. Damian Roland (@damian_rooland) and Dr. Rachel Rowlands (@rachrwlnds)

Sepsis in Children 2016

Damian Roland

629 views
Digital scholars
On Sick Kids and CRPs

posted on OCTOBER 7, 2016 · 3 comments

Today I am doing a post-publication review of an interesting paper that popped into my inbox this week. This paper was sent to me by the University of Lueven where the research was based via a promotion email.

This is the promotional email, entitled: "Rapid blood test can rule out serious infections in children".

The paper I am discussing is:

Should all acutely ill children in primary care be tested with point-of-care CRP: a cluster randomised trial
Step by step in febrile infants

2185 infants <91/7 with temp >=38C, no URTI/diarrhoea
Exclusions: source found on H&P, apyrexial in ED and subjective measurement only at home

Looks unwell or abnormal PAT

<=21/7

Leukocyturia

PCT >=0.5ng/mL

CRP>20 or neuts >10,000

None of these

Gomez Pediatrics 2016:138:e20154381
Digital scholars (continued)

FRANZ BABL: BEHIND THE SCENES – PREDICTING THE FUTURE

Team DFTB
Implementation of PECARN

Implementation of PECARN in Boston, US
• Setting with higher CT rate 21% (pre) → absolute reduction of 6%, 6% in CT rate
• No readmission in 72 h of discharged patients

Nigrovic Pediatrics 2015

Implementation of PECARN in Padua, Italy
• Setting with lower CT rate 7.3% (pre) → 8.4% (post)
• No missed patients

Bressan Acad Emerg Med 2012
Implementation of PECARN

Boston, US
[Nigrovic Paediatrics 2015]

CT rate 21% (pre)
→ 15% (post)

Padua, Italy
[Bressan Acad Emerg Med 2012]

CT rate 7.3% (pre)
→ 8.4% (post)
We planned to Tweet when we reached 20 patients that passed us by so fast we can now say that we've reached 25 patients! Thanks to you all!
Preferred Delivery of Education
Immersion in Communities of Practice

Connectivity

Scalability

Applicability

Amelioration of the Knowledge Translation Gap

Scalability

Connectivity

Applicability

Benefits of Social Media

- Amelioration of the Knowledge Translation Gap
- Scalability
- Immersion in Communities of Practice
- Connectivity
- Applicability
- Preferred Delivery of Education

<table>
<thead>
<tr>
<th>Mindset</th>
<th>Social Media Interaction</th>
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<td>Observer (Passive)</td>
<td>Engager (Active)</td>
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<td>Positive</td>
<td>Knowledge Acquisition</td>
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<tr>
<td>Negative</td>
<td>Information Overload and/or Frustration</td>
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“PEOPLE ARE NO MORE ADDICTED TO THE INTERNET; THAN ALCOHOLICS ARE ADDICTED TO BOTTLES”
- @DRMARKGRIFFITHS #SOMEPSYCH
Thank you!

We invite you to

- provide your input on today’s webcast,
- share your thoughts on future webcasts topics, and
- contact us at kter@air.org.

Please fill out the brief evaluation form:

The contents of this presentation were developed under grant number 90DP0077 from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this presentation do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.