

Twitter to Tenure, Blogging to Bold Action: Social Media for Education and Advocacy in Geriatrics

April 21, 2018

Canadian Geriatrics Society 38th Annual Scientific Meeting
Montreal, Canada

#CGS2018

WiFi Connect: 71128-77377

Bonnie Cheung (@BonnieCheung7)
Dr. Amanda Gardhouse (@Agardhouse)
Dr. Samir Sinha (@DrSamirSinha)

Dr. Chris Frank (@ChrisFrankCOE)
Dr. Kenneth Rockwood (@Krockdoc)
Dr. Camilla Wong (@camilla_wong)

Faculty/Presenter Disclosure

Presenters:

- Bonnie Cheung
- Dr. Chris Frank
- Dr. Amanda Gardhouse
- Dr. Kenneth Rockwood
- Dr. Samir Sinha
- Dr. Camilla Wong

Relationships with financial sponsors:

- Grants/Research Support: Li Ka Shing Knowledge Institute (Wong)
- Speakers Bureau/Honoraria: none
- Consulting Fees: none
- Patents/Other: copyright of the Clinical Frailty Scale (Rockwood)

Disclosure of Financial Support

This program has **NOT** received financial nor in-kind support from any organizations.

Potential for conflict(s) of interest: None.

Mitigating potential bias: not applicable

Objectives

At the end of the session, the participant will be able to:

1. Set up and organize a Twitter account for professional use;
1. Identify and demonstrate strategies on how to use Twitter effectively for advocacy and education in geriatric medicine; and
1. Use Twitter to expand professional networks and amplify the impact of scholarly activities.

Twitter to Tenure, Blogging to Bold Action: Social Media for Education and Advocacy in Geriatrics

- 10:00-10:30
- Why I blog for the British Geriatrics Society (advocacy)
 - How Twitter has grown my professional network (networking)
 - How I use Twitter for CME: from the perspective of a geriatrician practicing in a small town (education)
 - How trainees and the NGIG use Twitter as a communication tool (communication)
 - How Twitter has broadened the impact of my academic career (scholar)
 - Rules of professionalism in social media (professional)
- 10:30-10:40 Panelist Q&A
- 10:40-11:20 Concurrent Hands-On Workshops:
1. Twitter for Newbies
 2. Organizing Twitter
 3. Grow Your Twitter Impact
- 11:20-11:30 Wrap-Up and Share Your Learning

Bonnie Cheung (@BonnieCheung7)
Dr. Amanda Gardhouse (@Agardhouse)
Dr. Samir Sinha (@DrSamirSinha)

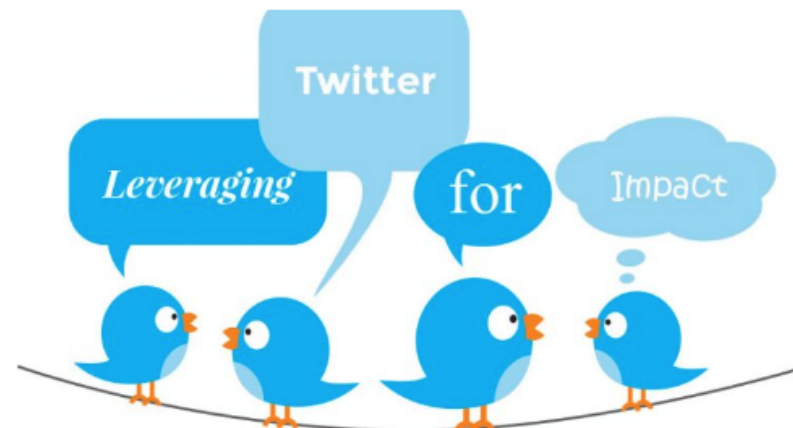
Dr. Chris Frank (@ChrisFrankCOE)
Dr. Kenneth Rockwood (@Krockdoc)
Dr. Camilla Wong (@camilla_wong)

Retweet

Together with [@DrSamirSinha](#) [@Krockdoc](#)
[@BonnieCheung7](#) [@AGardhouse](#)
[@ChrisFrankCOE](#) giving a [#CGS2018](#)
workshop on Twitter for geriatric
specialists.

Please RETWEET to help us show the
impact of Twitter!

cc [@CanGeriSoc](#) [@GerilInterestGp](#)
[@NGIG1415](#)



Why I blog for the British Geriatrics Society

(advocacy)

Dr. Kenneth Rockwood

Dr. Rockwood has published over 300 peer-reviewed scientific publications and is the Kathryn Allen Weldon Professor of Alzheimer research at Dalhousie University. He blogs regularly for the British Geriatrics Society.

How using Twitter has grown my professional network (networking)

Dr. Samir Sinha

Dr. Sinha is the Director of Geriatrics at Sinai Health System and the University Health Network. He is the Provincial Lead for the Ontario's Seniors Strategy. As a vocal advocate for the needs of older Canadians, he has found Twitter to be a useful resource to build connections and advocate effectively!

How I use Twitter for CME: from the perspective of a community-based geriatrician practicing in a small town (education)

Dr. Amanda Gardhouse

Dr. Gardhouse completed her Geriatric Medicine training at the University of Toronto in 2016. She has published on the use of Twitter as part of a geriatric medicine journal club and its use in geriatric medicine conferences. She is a community-based geriatrician in Orillia, a small town 1.5 hours north of Toronto.

Twitter to stay connected whilst in the “community”

1. Research
2. Conferences
3. Rounds
4. Content Experts
5. Capacity Building

Twitter for CME: Emerging Research

Practice-changing study alert!!! EPCAT-II finally published shows efficacy of ASA for VTE prophylaxis (after 5 days of DOAC) after elective arthroplasty #VTE
[nejm.org/doi/full/10.10 ...](http://nejm.org/doi/full/10.10...)

CONCLUSIONS

Among patients who received 5 days of rivaroxaban total knee arthroplasty, extended prophylaxis different from rivaroxaban in the prevention of thromboembolism. (Funded by the Canadian Institutes of Health Research; registration number, NCT01720108.)

6:43 PM - 21 Feb 2018



Deprescribing

@Deprescribing

Following



Access the newly released #Deprescribing #Cholinesterase Inhibitors and #Memantine algorithm developed to assist #healthcare professionals reduce #prescribing of unnecessary #dementia #medications
ow.ly/ONbf30igobY



Twitter for CME: Conference Engagement

Dr Hart - What works in acute ischemic stroke? Stroke unit, ASA, lytics, and in a small % (with defined ischemic penumbra) endovascular stent up to 24h!! #IntMed18 @mcmasterchse

Evidence-based management of acute ischemic stroke

Intervention	Effect size	Fraction of patients
Organized stroke unit care	Moderate	Large
Early aspirin	Small [^]	Large
i.v. tPA ≤ 4.5 hrs	Moderate	Moderate (20% at selected centers)
Endovascular stent clot retrieval ($\leq 6-24$ hrs)	Moderate-to-Large	Small (3% at U.S. GWTG hospitals late 2016; 15% at selected centers)

Perhaps moderate (Rothwell PM et al. *Lancet* 2016; 388: 365-75).

7:18 AM - 23 Mar 2018

Looking for other opportunities to reduce bleeding risk in #DOAC users? @roundstable {healthydebate.ca/theroundstable...} appraised ncbi.nlm.nih.gov/pubmed/28973247 @JAMA_current ... Essentially, eliminate drugs that increase bleed risk; amio, fluc, rifam, phenytoin #IntMed18 @crowthrm @Azzam_Khalid



Khalid Azzam @Azzam_Khalid

Dr. Crowther talking about managing bleeding with oral anticoagulants at #intmed18. DOACs is the right name! the best way to manage bleed is preventing it and the way to prevent bleed is to use agent that has least bleeding risk. @MacDeptMed ...

2:50 PM - 22 Mar 2018

Twitter for CME: Virtual Rounds



A reminder about the next webinar:

Tuesday, April 3, 2018 | 12:00PM to 1:00PM EST

Atypical femur fractures: What you need to know
Dr. Angela Cheung

<http://webcast.otn.ca/mywebcast/?id=80099347>

Ont. Osteo Strategy @FractureLink · Mar 29
#BeyondTheBreak #Webinar: @AngelaMCheung will be presenting on 4/3 on Atypical Femur #Fractures. Don't miss it! | @WCHospital @OTNtelemedicine | bit.ly/2srs...



Eric Wong
@EricWong_MD

Following

Dr. Christopher Patterson discusses preventative health in older adults at @Baycrest #geriatric medicine grand rounds @GERAScentre @dr_alexandrap



GerMedJC
@GerMedJC

Following

Bottom line on effect sizes, nice summary table from @CMAJ. Thanks again Dr. Shabbir Alibhai for an enlightening discussion.

#GerMedJC

Appendix 2 (as supplied by the authors): Summary and rationale for small and large treatment effects

Approach	Small effect	Large effect
Standardized Mean Difference	0.20	0.80
Mean Difference in minimal important difference units	0.60	2.00
Mean Difference in natural units	0.60 point reduction	2.00 point reduction
Ratio of Means	0.02 8% less	0.63 37% less

Twitter for CME: Content Experts



Canadian Geriatrics @CanGeriSoc · 28 Sep 2017

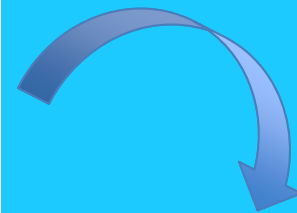
HELP increase #Delirium recognition via @JAMA_current @sharon_inouye @ElderLifeProg



JAMA Clinical Reviews: Interviews about ideas & innovations in med...

Download past episodes or subscribe to future episodes of JAMA Clinical Reviews: Interviews about ideas & innovations in medicine, science & cli...

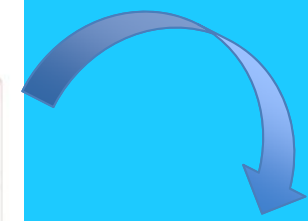
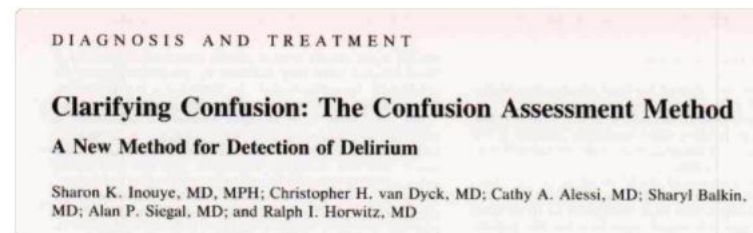
itunes.apple.com



Amanda Gardhouse @AGardhouse · 28 Sep 2017

Replying to @CanGeriSoc @JAMA_current @sharon_inouye

at min 8:30ish states delirium is acute OR fluctuating? Not AND for 1st core criteria?



Sharon Inouye, MD @sharon_inouye · 29 Sep 2017

@AGardhouse can use either. OR max sensitivity for detection, AND max specificity. See HospitalElderLife [program.org](https://www.program.org) CAM site

Twitter for CME: Capacity Building

Some tips from @MyAlzStory on how to help someone with anxiety and aggression in dementia

#MDTeaClub

20 Questions to Change the Direction of Dementia Anxiety and Aggression

People living with dementia are people; they respond normally when they are threatened, demeaned and made to feel powerless: they resist, lash out, become agitated or try to flee. Blaming the disease leads us in the wrong direction. What we should be doing is asking ourselves questions to reset the compass ; questions such as:

1. What might I and/or others have done to precipitate this situation, and how can I rectify it as quickly as possible with as little disruption as possible?
2. Would I behave the same way in similar circumstances? How would I feel? What would I want?
3. How can I defuse the situation? (*Hint: do not tell people who are upset or agitated to "calm down!"*)
4. What is threatening the person? How can I remove the threat?
5. How can I help this person feel more at ease?
6. What unmet need might this person be expressing? Is s/he in pain or experiencing another kind of physical discomfort? Is s/he hot, cold, wet, thirsty, hungry, etc.?
7. What environmental factors might be contributing to his/her anxiety, and how can I neutralize them?
8. Is my tone of voice conciliatory and respectful?
9. Is my body language relaxed and open?
10. Can the person see and hear me properly?

the Usual Suspects Volume 1

Common Drugs Associated with Delirium

The Blues Brothers FEATURING Antidepressants	Inside Out FEATURING Antiemetics	Sleepy Hollow FEATURING Benzodiazepines	7 Year Itch FEATURING Antihistamines	A River Runs Through it FEATURING Incontinence Agents
---	---	--	---	--

AMITRIPTYLINE DESIPRAMINE DOXEPIN IMIPRAMINE NORTRIPTYLINE PARoxetine	DIMENHYDRINATE PROCHLORPERAZINE PROMETHAZINE	ALPRAZOLAM CHLORDIAZEPOXIDE CLONAZEPAM DIAZEPAM LORAZEPAM Oxazepam Tetrahydropyridine	H1 ANTAGONISTS BROMPHENIRAMINE CLORPHENIRAMINE DIPHENHYDRAMINE HYDROXYZINE MECLIZINE H1 ANTAGONISTS	DARIFENACEN FESOTERODINE OXYBUTYNIN SOLIFENACIN TOLTERODINE
--	--	---	---	---

DeliriumCare Network @DeliriumCare Mar 7
Coming soon to a health facility near you... "The Usual Suspects: Common Drugs Associated with #Delirium, Volume 1". Can you guess which drugs or characters were featured in Volume 2? #WDAD2018

www.DeliriumCareNetwork.com

How trainees and the NGIG use Twitter as a communication tool (engagement)

Bonnie Cheung

Bonnie is a fourth year medical student at the University of Toronto and will be starting her postgraduate training in Internal Medicine in July. She is the Co-Chair of the National Geriatrics Interest Group (NGIG). She hopes to continue caring and advocating for seniors in her future career.

How Trainees and the NGIG use Twitter as a communication tool

Bonnie Cheung

MD Candidate, Class of 2018

University of Toronto

NGIG Twitter Account: @NGIG1415



The image shows the Twitter profile page for the National Geriatrics Interest Group (@NGIG1415). The header features a banner with the text "NGIG" in large red letters, a red maple leaf, and the full name "National Geriatrics Interest Group". Below the banner, the profile name "NGIG" and handle "@NGIG1415" are displayed, along with the description "National Geriatrics Interest Group" and a link to their Facebook page. The profile statistics show 413 tweets, 238 following, 437 followers, and 72 likes. A "Follow" button is visible. The main content area shows a tweet from NGIG @NGIG1415, 11 minutes ago, announcing the @CanGeriSoc conference. The tweet includes a quote from RGIG @GerInterestGp about the conference. The right sidebar contains a "New to Twitter?" sign-up prompt and a "You may also like" section with recommendations for RGIG and Canadian Geriatrics.

NGIG
@NGIG1415
National Geriatrics Interest Group
[facebook.com/pages/National...](#)
Joined July 2014
80 Photos and videos

Tweets **Tweets & replies** **Media**

NGIG @NGIG1415 · 11m
We will also be tweeting about the @CanGeriSoc conference, beginning tomorrow April 19 until April 21 in Montreal! Stay tuned!

RGIG @GerInterestGp
The @CanGeriSoc conference quickly approaching! We are looking forward to seeing many of you there especially at Resident Day. For those who cannot attend, be sure to follow us for up-to-date posts on conference events,...

New to Twitter?
Sign up now to get your own personalized timeline!
Sign up

You may also like · Refresh

RGIG @GerInterestGp

Canadian Geriatrics @CanGeriSoc

NGIG Retweeted
Canadian Geriatrics @CanGeriSoc · Apr 7

RGIG Twitter Account: @GerInterestGp



Tweets **Following** **Followers** **Likes** **Lists**

1,432 **394** **822** **221** **2**

[Follow](#)

RGIG
@GerInterestGp

Resident Geriatric Interest Group: a Canadian initiative to inspire residents to learn about and embrace the older individuals we treat.

Joined June 2011

[Photos and videos](#)

Tweets **Tweets & replies** **Media**

 **RGIG** @GerInterestGp · 17h
The @CanGeriSoc conference quickly approaching! We are looking forward to seeing many of you there especially at Resident Day. For those who cannot attend, be sure to follow us for up-to-date posts on conference events, presentations, and more! @NGIG1415

Resident Day
Hotel Bonaventure Montreal 
Thursday, April 19, 2018

  2 

 **RGIG** @GerInterestGp · Apr 16
The @CanGeriSoc conference is quickly approaching! We are looking forward to seeing many of you there especially at Resident Day. For those who cannot

New to Twitter?
Sign up now to get your own personalized timeline!

[Sign up](#)

You may also like · Refresh

 **Canadian Geriatrics**
@CanGeriSoc

 **NGIG**
@NGIG1415

Twitter's Roles in Improving Communication for Trainees

Promotion of NGIG initiatives

Networking with fellow trainees and physicians

Education and advocacy of geriatric issues

Promotion of NGIG initiatives

- Opportunities to be involved with NGIG and its initiatives

NGIG @NGIG1415 · 7 Aug 2017

It's not too late to join the NGIG Executive Team! Deadline for applications is Sunday, August 27th, see attached:

The attached document is titled "Executive Positions for 2017-2018, Second Call". It contains information about the National Geriatrics Interest Group (NGIG) and is currently seeking applications for the 2017-2018 Executive Team. The document specifies that there are three executive positions available: President, Vice-President, and Secretary. It also provides details on the application process, including the deadline of August 27th, 2017, and the contact information for the NGIG Executive Team.

NGIG @NGIG1415 · 28 Dec 2017

Current feature article - NGIG research. Check out the NGIG website for more!... fb.me/4QEwQz4vi

NGIG @NGIG1415 · Mar 5

****CALL FOR AWARD APPLICATIONS****

Don't miss the opportunity to apply for the National Geriatrics Interest Group... fb.me/AJQgpKUm

NGIG @NGIG1415 · 7 Oct 2017

****CALL FOR SUBMISSIONS****

NGIG is now accepting submissions for our annual publication! See attached poster. Deadline: Jan 30, 2018

The poster is titled "CALL FOR SUBMISSIONS" and is for the National Geriatrics Interest Group (NGIG) publication, Volume 6, Issue 1. The theme is "Healthy Aging: Innovations and Strategies in Geriatric Medicine and Research". The poster lists various categories for submissions, including Research-based (Qualitative, Quantitative, or Mixed Methods), Non-research based (Opinion pieces, Case Reports/Clinical Encounters, Commentaries, and Creative Writing). It also provides instructions for all submissions, such as using Microsoft Word, including a cover page, and submitting to the editor. The submission deadline is January 30th, 2018.

4 retweets, 5 likes

Networking with fellow trainees and physicians

- Discussing important topics in geriatrics

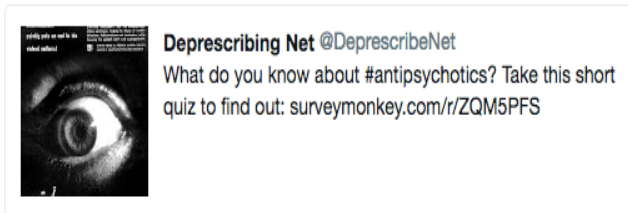
You Retweeted



Amanda Gardhouse @AGardhouse · 3 Aug 2017

Quick but important survey on what u know (or dont) about antipsychotics

@Deprescribing @CanGeriSoc @GerInterestGp @NGIG1415



2 retweets 2 likes



NGIG @NGIG1415 · Feb 26

Geriatric Medicine Journal Club (#GeriMedJC) is hosted by the University of Toronto Division of Geriatric...



GeriMedJC

Geriatric Medicine Journal Club (#GeriMedJC) is hosted by the University of Toronto Division of Geriatric Medicine. Features recent geriatric literature with...

youtube.com

1 retweet 2 likes

Networking with fellow trainees and physicians

- CGS Annual Scientific Meeting 2017



NGIG @NGIG1415 · 22 Apr 2017

.@CanGeriSoc conference gives @NGIG1415 executives an opportunity to meet in person. Another great and eventful year! #cgs2017



1 3 11



NGIG @NGIG1415 · 22 Apr 2017

Geriatrics career panel at student day with representatives from geriatric medicine, care of the elderly, and geriatric psychiatry! #cgs2017



1 4

Networking with fellow trainees and physicians

- #cgswiseoldwords



Networking with fellow trainees and physicians

- CAGP Annual Scientific Meeting 2017



RGIG @GerInterestGp · 5 Nov 2017

Agree - great to further connections bw RGIG+ @NGIG1415 and CAGP+ Geri psychiatrists. Many wonderful activities for trainees at #CAGP2017

Amanda Canfield @amandabcanfield

Great to see interest in Geri psych by trainees + support of trainees from CAGP and staff Geriatric psychiatrists at #CAGP2017 @NGIG1415



RGIG @GerInterestGp · 5 Nov 2017

Come visit our booth during poster session(s) to learn more about RGIG/NGIG #cagp2017 @ngig1415 @amandabcanfield



Networking with fellow trainees and physicians

- Study on the impact of hashtag #CGS2015 at the Annual Scientific Meeting

“#CGS2015 connected me with physicians and other fellow trainees and made myself feel, as a relatively new learner, like I was part of a community.”

“I've really appreciated the incorporation of Twitter into the geriatrics community. I think it's been helpful for maintaining connections across the country and even internationally - this is particularly helpful for a relatively small specialty.”

“I think it has really helped to get discussions going about topics outside of their presentations. It helps me be informed about the sessions I did not attend. It connects all the delegates so they can keep in touch following the conference easier.”

Education and advocacy of geriatric issues

- Educational tool to keep up to date with literature

You Retweeted


 **European Delirium** @EDA_delirium · 2 Nov 2017

Great article discussing how to prevent hospital #delirium and what health professionals can do to treat it buff.ly/2A2fURL




dikernisan.net

1 30 27

 **NGIG** @NGIG1415 · 25 Oct 2017

"A new study, published in the open-access journal *Frontiers in Human Neuroscience*, shows that older people who..."



Dancing can reverse the signs of aging in the brain

New research, published in *Frontiers in Human Neuroscience* compares two fitness routines to explore anti-aging effects on the brain in the elderly.

blog.frontiersin.org

4 3

Education and advocacy of geriatric issues

- #whygeriatricswednesdays



NGIG @NGIG1415 · Apr 11

Robotic cats and dogs are increasingly being used by older adults with dementia to reduce stress and improve mood. Learn more here: [youtube.com/watch?v=cFvGAL...](https://www.youtube.com/watch?v=cFvGAL...)

#whygeriatricswednesdays

Submitted by: Queen's GIG



Robotic Pets Are Helping Dementia Patients (HBO)

Benchmark Senior Living at Plymouth Crossings uses robotic pets to help brighten the mood of elderly residents, while also stimulating cognitive function. VI...

[youtube.com](https://www.youtube.com)



1



4



NGIG @NGIG1415 · 14 Dec 2016

Daycare within a seniors' home, "where years become moments".

#whygeriatricswednesday



Seniors home brings young and old together

A Seattle seniors home is bringing together the very young and the very old. Ioanna Roumeliotis goes inside 'The Mount'. »»» Subscribe to The National to wat...

[youtube.com](https://www.youtube.com)



1



1



Education and advocacy of geriatric issues


• RGIG: World Delirium Awareness Day



RGIG @GerIntInterestGp · Mar 14

Is your #WDAD2018 wrapping up? Join us in one hour for a tweet chat! We'll be discussing hot topics in #delirium care including the REDUCE and HOPE-ICU trials! Follow at #WDADchat

@idelirium @TheRakeshArora @minipixie26
@AlishyaBurrell @psychinformatic @A_MacLulich



Join us for the **World Delirium Awareness Day**
Tweetchat
Today at 9pm UTC, 5pm Boston

Moderators: [Alishya Burrell \(@AlishyaBurrell\)](#)
& [Heidi Lindroth \(@minipixie26\)](#)

iDelirium Members: [Rakesh Arora \(@TheRakeshArora\)](#), [iDelirium \(@iDelirium_Aware\)](#)

Delirium Superheroes: [Alasdair MacLulich \(@A_MacLulich\)](#) & [Mani Krishnan \(@psychinformatic\)](#)

We will discuss :

Selected Reading:	Issues to discuss:
1.1 http://bit.ly/2p5wUCT REDUCE Randomized CT	• Pharma: Haldol use, evidence & Misconceptions
1.2 http://bit.ly/2FMgs3H HOPE-ICU RCT	• Delirium identification
	• Patient & family distress during delirium

As well as an Open Tweet Forum to discuss any other papers/issue related to #delirium #WDADchat #WDAD2018



“It was really great, being able to plan the social media movement with the world leaders in delirium. [...] It brought people from across the world together to discuss topics in delirium for one hour, making it feel like a community based movement.”

Education and advocacy of geriatric issues

- Reducing the stigma and misconceptions of geriatrics

RGIG Retweeted



Sean Ninan @sean9n · Jan 23

Some of geriatrics involves convincing others not to write off older people. Some of geriatrics involves convincing others not to be overzealous in investigating and treating frail older people. It's difficult to teach (and learn!)

10 84 180



NGIG @NGIG1415 · Feb 13

Say NO to Ageism-

Healthcare professionals have been noticing attitudes of discrimination towards the geriatrics...



Ageism in health care needs to end, doctor says | CBC News

Some doctors are warning of a culture of ageism in the medical world, saying health workers commonly treat old people as though they don't
cbc.ca

5 10

Twitter's Roles in Improving Communication for Trainees

Promotion of NGIG initiatives

Networking with fellow trainees and physicians

Education and advocacy of geriatric issues

How Twitter has broadened the impact of my academic career (scholar)

Dr. Camilla Wong

Dr. Wong is a geriatrician at St. Michael's Hospital and assistant professor at the University of Toronto. Despite not getting a smart phone until 2017, she has used Twitter for many years to disseminate geriatrics and identify collaborative opportunities.

Lenartowicz M, Parkovnick M, McFarlan A, Haas B, Straus SE, Nathens AB, Wong CL. An evaluation of a proactive geriatric trauma consultation service. *Annals of Surgery*. 2012 Dec;256(6):1098-101.
doi: 10.1097/SLA.0b013e318270f27a.

Journal Impact Factor: 8.98
Citations: 44

An Evaluation of a Proactive Geriatric Trauma Consultation Service.

Overview of attention for article published in Annals of Surgery, October 2012



About this Attention Score

In the top 25% of all research outputs scored by Altmetric

MORE...

Mentioned by

27 tweeters

Readers on

34 Mendeley

What is this page?

SUMMARY

Twitter

Title An Evaluation of a Proactive Geriatric Trauma Consultation Service.

Published in Annals of Surgery, October 2012

DOI 10.1097/sla.0b013e318270f27a

Pubmed ID 23108129

Authors Lenartowicz M, Parkovnick M, McFarlan A, Haas B, Straus SE, Nathens AB, Wong CL, Magda Lenartowicz... [show]

Abstract To describe and evaluate an inpatient geriatric trauma consultation service (GTCS).

View on publisher site

Alert me about new mentions

TWITTER DEMOGRAPHICS

MENDELEY READERS

ATTENTION SCORE IN CONTEXT

This research output has an **Altmetric Attention Score of 17**. This is our high-level measure of the quality and quantity of online attention that it has received. This Attention Score, as well as the ranking and number of research outputs shown below, was calculated when the research output was last mentioned on **17 April 2018**.

ALL RESEARCH OUTPUTS

#639,550

of 9,699,172 outputs

OUTPUTS FROM ANNALS OF SURGERY

#571

of 4,596 outputs

OUTPUTS OF SIMILAR AGE

#6,999

of 117,058 outputs

OUTPUTS OF SIMILAR AGE FROM ANNALS OF SURGERY

#12

of 128 outputs

Altmetric has tracked 9,699,172 research outputs across all sources so far. Compared to these this one has done particularly well and is in the 93rd percentile: it's in the **top 10% of all research outputs ever tracked by Altmetric.**

An Evaluation of a Proactive Geriatric Trauma Consultation Service.

Overview of attention for article published in Annals of Surgery, October 2012



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Abstract To describe and evaluate an inpatient geriatric trauma consultation service (GTCS).

[View on publisher site](#)

[Alert me about new mentions](#)

TWITTER DEMOGRAPHICS

MENDELEY READERS

ATTENTION SCORE IN CONTEXT

The data shown below were collected from the profiles of 27 tweeters who shared this research output. [Click here to find out more about how the information was compiled.](#)



Geographical breakdown

Country	Count	As %
Canada	12	44%
United Kingdom	4	15%
Colombia	2	7%
Italy	1	4%
Ireland	1	4%
Unknown	7	26%

Demographic breakdown

Type	Count	As %
Members of the public	14	52%
Scientists	9	33%
Practitioners (doctors, other healthcare professionals)	4	15%
Science communicators (journalists, bloggers, editors)	1	4%

Lenartowicz M, Parkovnick M, McFarlan A, Haas B, Straus SE, Nathens AB, Wong CL. An evaluation of a proactive geriatric trauma consultation service. *Annals of Surgery*. 2012 Dec;256(6):1098-101.
doi: 10.1097/SLA.0b013e318270f27a.

Journal Impact Factor: 8.98

Citations: 44

Altmetric: 93rd percentile of all research outputs ever tracked by Altmetric.

Twitter mentions: 27



Camilla Wong 🇨🇦 @camilla_wong · Mar 21

At the @Royal_College National Specialty Societies Specialty Medicine Summit to make the case for cross-specialty collaborative care models and 10 key elements for implementation. Slides uploaded here:

slideshare.net/CamillaWong/rc... #CANMEDS #Collaborator



RCSPC NSS Specialty Medicine Summit: Cross-Sp...

Objectives: 1. Make the case for cross-specialty collaboration. 2. Share an example of a successful cross-specialty collaborative care model (geriatric tr...

slideshare.net



Christopher Steer @drcbsteer · 26 Oct 2017

Thanks to @camilla_wong for some of the slides for #VCOP17 today. #gerionc leader



Andrew Petrosoniak @petrosoniak · Feb 22



Replying to @AM_Cressman @Sunnybrook and 8 others

Haha! Always welcome! @camilla_wong takes good care of the elderly trauma pts! Trauma = multidisciplinary team sport



Dan McIsaac @mcisaac_d · 10 Nov 2017



Glad to see the role of non-geriatricians mentioned. Anesthesiologist can contribute a lot to care of older people. Periop Care, critical care, pain management, and more @mdneuman. Especially if we collaborate with geriatricians @camilla_wong



Eric Wong @EricWong_MD · Apr 1



Replying to @wassdoc @WilliamDale_MD

We are fortunate in Toronto — our geriatric medicine residency program connects trainees with appropriate mentors early in their training, something I've benefitted from! @DrBarbaraLiu @camilla_wong @DrSamirSinha @UofTPGME



Jessica Page @JessLPage · Jan 31



Ortho Grand Rounds on geriatric trauma were very well received today. Buzz on QI lasted all day. The group loved #endPJparalysis. Thanks to @camilla_wong for a twitter feed of references and for teaching me right from med school the value of geriatrics

Rules of professionalism in using social media (professionalism)

Dr. Chris Frank

Dr. Frank is a family physician with certification in Care of the Elderly. He is a Professor of Medicine at Queen's University and works at Providence Care in Kingston. He thinks people spend too much time on their phones but appreciates the positives of social media.

Professionalism and social media

Not an oxymoron!

Did you follow this “debate”?



CMA Suggestions

- be transparent (including COI)
- respect others
- focus on your area of expertise!

What does CMPA suggest?

- Have an objective & select the right platform
- Avoid one-on-one discussions
- Establish clear boundaries
- “Reach is wide, and the audience is unknown”
- Consider your communication style and reach

CMPA Top 10

- Generate interest and participation
- Libel and slander and defamation laws apply
- Develop a social media policy
- Manage privacy and minimize breaches
- Follow your College guidelines!

What is in our policy?

- Promote the mission of CGS (beyond the CPD focus) using whatever resources and links will meet that goal
- Tweet any content that would be of interest to engage members and attract new ones
- Promote the CGS CPD Journal and the Canadian Geriatrics Journal by Tweeting articles and content when new issues come out (and intermittently between new issues)
- Tweet and distribute information related to advocacy for care of seniors
- Disseminate information that will not be offensive or inappropriate to CGS members or the general public
- Not be like Donald Trump- participants will not Tweet messages criticizing or embarrassing the contributing authors to the CGS CPD Journal or the CGJ; comments expressing a difference of opinion to stimulate thought and discussion should be done with consideration of the authors who have volunteered their time to produce educational material

Hands-On Workshops

Group 1: Newbies to Twitter

This is for attendees who have never used Twitter.

- set up a Twitter account
- choose a handle
- set up a professional profile
- set up a Follow list
- use a hashtag
- like a tweet
- re-tweet a tweet
- send out your first tweet

Group 2: Organizing Twitter

This is for attendees who have used Twitter, but rarely, and/or find the amount of information overwhelming.

- organize Twitter by using the list feature
- decide who to follow and who to not follow
- adjust settings to turn off notifications/moments,
- adjust the settings to modify the timeline of tweets
- identify features of a well-written tweet

Group 3: Grow Your Twitter Impact

This is for attendees who are comfortable with Twitter basics and are looking to grow the impact of their tweets.

- use Twitter analytics
- understand ‘impressions’
- design a poll
- add media to tweets
- send direct messages
- try complementary tools such as Tweetdeck to send out pre-timed tweets