



## Social Media Marketing for DPMs

This is a great way to get new patients—maybe.

BY MARK TERRY

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Social media is now even more pervasive than ever, and in theory, more powerful as a marketing tool than ever. Or not. For the sake of this article, social media will be defined as Internet-based platforms that allow individuals to create, share, or exchange information in virtual communities and/or networks.

### Dr. Pimple Popper

Dr. Sandra Lee, a board-certified dermatologist, skin cancer surgeon, and cosmetic surgeon, is regularly brought up as an example of a doctor's successful social media campaign. That's a little bit like holding up JK Rowling as an example of a successful children's novelist—there's really



Dr. Lee

no comparison. Dr. Sandra Lee, AKA Dr. Pimple Popper, is an outlier—like JK Rowling. But there are lessons to learn from her approach and success. So, let's take a moment to look at what she does. As she says on her YouTube channel, "This channel was first a place for me to post my television segments, with me discussing and treating common skin issues and cutting edge cosmetic surgery techniques. In the last year, it has become so much more!"

Mike Crosby of Provider Resources (Brentwood, TN), says, "Her Instagram has had over a billion views. It's unbelievable. It's her doing excisions. Her doing black-



Mike Crosby

head removal. Her doing sarcoma removal, all kinds of stuff. She has over 2.5 million followers. It does translate into business. It's international, but there are people who will bypass other people to go to that practice." Larry Maurer, of Washington Foot & Ankle Sports Medicine (Kirkland, WA), says, "I know that account. My kids follow that account. You know why? Because it's gross. She puts pictures of big abscesses being popped and they look at it; it's exciting and gross and my boys follow it. She hit it big by just shocking people with huge pimples, which is funny. It's brilliant."

As we discuss social media and social media marketing, keep this

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example in mind—NOT because the world is waiting for disgusting videos of foot ulcers.

## A Social Media Overview

This list is not comprehensive, but will briefly describe the most dominant social media platforms.

### Facebook

Launched in 2004, the other people in each user's network are dubbed "Friends" and messages appear on the user's "wall." The wall is the page you view when you go on Facebook. It allows users to post pictures, videos, and share and "like" posts. One recent innovation on Facebook is the ability to conduct live broadcasts, Facebook Live. Viewers can watch live and interact with you during it, and the video then remains on your wall. A 2015 report compiled by *Sprout Social* [<http://sproutsocial.com/insights/new-social-media-demographics/#facebook>] indicated Facebook has 1.44 billion monthly active users. Despite most people claiming it's for older people, the study found that 33% of women on Facebook were 18 to 24 years of age.



Larry Maurer

### Twitter

Twitter was founded in 2006. Twitter allows users to send and read messages that are 140 characters long. The users access it through a website interface or mobile device. Hashtags (#), are used to denote search terms. A message is called a "tweet." Photographs are often put up and the most practical usage for Twitter is the use of abbreviated URLs that can be generated on services like [TinyURL.com](http://TinyURL.com), [Bitly](http://Bitly.com) or [Google URL shortener](http://Google URL shortener). These services take long URLs and shorten them to accommodate whatever content is tweeted. For the initiated, scanning through a Twitter feed can be like taking a quick walk through an enor-

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## 9 Ways to Market Your Podiatric Medical Practice on Social Media

In theory, there are infinite ways to use social media to market your practice—who would have imagined gross videos of exploding pimples and abscesses would be a thing?

**1) Paid advertising.** Facebook, for example, has opportunities for targeted paid advertisements, and you can limit the costs by putting a cap on the ad after a specific number of clicks. It can also be targeted to regions and groups. Twitter also has paid advertising opportunities.

**2) Identify where your patients are online.** Do your patients use Facebook? Twitter? Instagram? One simple way to approach this is to ask patients what they use and if they would be interested in joining a practice-related group on that platform. One rule, though, is not to overextend your presence. Pick a couple of platforms, not all of them.

**3) Keep your information up-to-date.** Whatever social media you do use, one of the keys is going to be the "About" section that describes who you are, with links to your practice website and basic practice information. Keep it up-to-date.

**4) Pay attention to keywords.** This is probably less important on Facebook, but it's critical on Twitter. Develop a list of keywords related to your specialties or the treatments and services you offer. Integrate them into your profiles and your content. It will improve search engine optimization.

**5) Advertise availability.** Similar to keeping information up-to-date. Not only should your "About" information provide office hours, but use social media to let your patients know of changes in hours, vacations, special events, and holidays.

**6) Become a thought leader.** Whether that was her intention, Dr. Pimple Popper, Sandra Lee, became even more influential through her presence, which led to or expanded her opportunities in the media to be asked about dermatology and skin-related topics. Part of social media, from a professional perspective, is to promote a certain identity and brand. Yours may be to push your brand as a trusted expert in your field.

**7) Build patient relationships.** Social media is, at root, about relationships. If you can, as a podiatric physician, increase your visibility to the friends and family of current patients and social media followers, that word of mouth may eventually expand to new patients in your practice.

**8) Provide updates about services and promotions.** This is a way to advertise any special services you might be offering, or seasonal offerings.

**9) Link to content.** If you create articles about topics of interest on your website, link to them through your social media presence—Twitter is great for this, utilizing specific hashtags as search terms. If you present videos on a YouTube channel—mini-seminars on foot care, for example, or any public speaking you might do—link to those via your social media platforms. ●

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mous cocktail party, catching snatches of conversation. Twitter tends to skew younger, with 37% of users age 18 to 29, and 25% age 30 through 49. This seems somewhat ironic, given a certain 70-year-old U.S. president who uses Twitter regularly to communicate directly to his fans, bypassing what he refers to as the “filter” of “fake news.”

### Pinterest

Launched in 2010, Pinterest is dubbed a “visual discovery, collection, sharing, and storage tool.” It tends to be collections of images, as if “pinning” them to virtual bulletin boards. Users save and share

be accurately described as a search engine for video content. It was launched in 2005, and a year later, it was bought by Google for \$1.65 billion. YouTube allows users to upload, view, and share videos. People can create and subscribe to various YouTube channels. Channel owners can allow for viewer comments, if they wish.

### Blogs

Short for “web log,” it is a website that acts as a kind of online diary.

### Snapchat

Snapchat is one of the newest apps. Not much has been published

ented. It was launched in 2003. For the most part, LinkedIn is primarily a site for individuals to post resumes, and businesses to post profiles. Because of its gate-access approach, it behaves primarily as a business networking tool.

### Others

Google has created its own community to compete with Facebook called Google+, although it’s nowhere nearly as popular. There are numerous niche networking sites, such as Strava for bicyclists and Fishbrain for diehard fishermen or women.



Rem Jackson

## Why Use Social Media to Market Your Practice

The primary reason to use social media in your medical practice is that social media is where the people are. According to *Statista*, <https://www.statista.com/statistics/265770/most-popular-us-websites-by-market-share-of-visits/> Google is the single most popular website in the U.S. as of February 2016 followed by Facebook, then YouTube.

Crosby says, “I consider social media one of the keys to driving business. Why? Because that’s where everybody is. Whether it’s Instagram, Facebook, Pinterest, or Google+, there are a lot of educational things that are posted that have links in them that drives business

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pins based on pretty much whatever they’re interested in. It veers far more strongly toward women. The age demographic is 34% 18-29 years of age, 28% 30-49 years of age, 27% 50-64 years of age, and 17% 65+. Studies indicate that 42% of women online use Pinterest compared to only 13% of men.

### Instagram

Launched in 2010, Instagram is similar to Pinterest in that its focus is mobile photo-sharing and video-sharing, with a social networking component. The maximum video length is 15 seconds. About 300 million users share over 60 million photographs every day. Over half, 53%, are 18 to 29 years of age, with 25% in the 30 to 49-year bracket. It drops dramatically after that, with 11% in the 50 to 64 age group. Again, women are bigger users than men. 29% of online females use Instagram compared to 22% of men.

### YouTube

Most people are unlikely to view YouTube as social media, which is a video-sharing website. It can also

about the demographics, although it seems to skew very young and female. Snapchat allows for image messaging, but one of the key things about Snapchat is that messages are very short-lived and self-deleting. That would seem to make it the purview of perverts sending sexually-oriented photographs, teenagers who don’t want their parents to be able to

access their messages (not necessarily mutually exclusive), and spies. According to *Wikipedia*, a March 2016 survey found that 71% of users preferred the app for chat, messaging, and imaging services, compared to only 5% who used it for various published and public features.

### LinkedIn

Also dubbed social media, LinkedIn is business and employment-ori-

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to your website, from your website to an appointment, and to revenue. It’s economical. It’s not free, but it’s the most economical thing to work with.”

Rem Jackson, of Top Practices (Las Vegas, NV), says, “For marketing, you need to go where the people are, and the people are on social media.” He also notes that women are the healthcare decision-makers in

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most households. They decide when they go to the doctor, when the kids go to the doctor, and when their husbands go to the doctor. And women are on social media.

**Four reasons to utilize social media:**

- 1) To increase opportunities for new patients.
- 2) To increase brand awareness and build the confidence of new and existing patients.
- 3) Develop patient loyalty and a positive referral base.
- 4) Increase patient retention and per-patient revenue.

**Reasons Not to Use Social Media**

Anecdotally, medical practice consultants seem to love the idea

of social media marketing. Also, anecdotally, physicians seem to be less enamored of it. Dike Drummond, MD, a family practice physician, CEO and Found-



Dr. Drummond

er of TheHappyMD.com, who now focuses on physician burnout, wrote a scathing blog post titled, “Healthcare Social Media is a Waste of Time (or worse) for Most Physicians.” In it, he cites three rea-

sons social media is a bad idea. They are:

**1) No return on investment (ROI).** Interestingly, one of the mantras—and a really good one—is that whatever takes physicians away from doing what only they can do—practicing medicine—can be a problem. And as Drummond notes, “Remember, no one pays you to log in and post on Facebook.”

A corollary to this is another statement practice consultants and marketing consultants repeat often, usually credited to Peter Drucker: “If you can’t measure it, you can’t improve

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## Social Media Best Practices for Physicians

**S**ocial media is a minefield. As I wrote two years ago: “Let’s admit that some people should just stay off social media.” If you’re the type of person who participates in every online argument you’re invited to, especially politics, this isn’t going to be a good business venue for you. And if you view social media as a stupid waste of time—hard to argue sometimes—then you’re probably right and you should spend your valuable time doing something else.

With that in mind, here are some tips for social media best practices.

**1) Set guidelines.** HIPAA is an important part of that, but decide what you and/or your practice will and absolutely will not do on social media. And stick to it.

**2) Have a purpose.** Don’t use social media just because you can. Use it for specific reasons—to engage with patients, to market your practice, to expand your presence outside your circle, etc.

**3) No politics.** No religion. These are no-win topics for physicians, for the most part.

**4) Keep it professional.** If you have a personal online social media presence, keep it separate (with great difficulty) from your professional social media presence. This is extremely difficult to do; however, you’re always going to be a physician. It’s best to just keep it professional.

**5) Don’t post or write anything you would not want your mother to read!** Rem Jackson said in 2015 and reiterated it this year, “There is absolutely no room for bathroom humor or anything that

smacks of sexism or racism. There is zero room for political discussion and debate.”

**6) Pay attention to security settings.** It’s vital on blogs, Facebook, and YouTube, in particular. You want to keep Internet “trolls” from taking over your posts. At the very least, you or someone on your staff must monitor the interactions and use what author and super-blogger John Scalzi refers to as “The Mallet of Loving Correction” to eliminate inappropriate comments and posts.

**7) Use it regularly.** It’s better to not use it at all than to only use it sporadically. It gives a negative impression if someone shows up to your blog, Facebook page, or Twitter feed, and nothing new has been posted in four months.

**8) Stay neutral and positive.** No politics! Jackson noted that for the last two years, Facebook has become the place where angry people scream about politics. Be warned.

**9) Use links.** Link to your own content. Link to other interesting content. If you’re using certain types of social media, you can tie the platforms together. For example, a Twitter post or Instagram post can be tied to push to Facebook, etc.

**10) Keep it short.** Twitter demands it, but if you want to write long-form, put it on a blog or your website, and link to it on social media. Social media really does resemble a cocktail party.

**11) Absolutely never, under any circumstances, provide specific medical advice on social media. •**

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it.” Determining if your social media presence and efforts are actually bringing in new patients should be as simple as asking new patients how they heard of you, but otherwise, it can be difficult to determine its ROI.

**2) It’s dangerous.** Drummond ties this into his business, which is treating physician burnout. His point,

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## Being effective on social media is a learned skill and it takes time and effort to figure it out.

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which is also a good one, is that being effective on social media is a learned skill and it takes time and effort to figure it out. But is it worth it to you? A bigger risk is simply the hazards of potentially violating HIPAA or irritating existing or potentially new patients.

**3) It’s a fad.** Drucker is probably crazy in terms of this. But his point is that social media outreach seems

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to work better if your practice or a significant part of it “consists of products or services the client pays cash for.” Or, he notes, if you have spare time or don’t care about money—so social media is a hobby. This is interesting because Maurer, who is very skeptical about the effectiveness of social media in bringing patients into the office (more so now than he was two years ago), has a hobby that underpins his social media practice—sports photography. And in the past, he has tied his social media efforts—primarily focused on Instagram photographs—into raffles that gave away free tickets to Seahawks playoff games. But, he notes that it was almost a total failure on Facebook, with people not even responding, whereas on Twitter, it was so popular it had an overwhelming response.

### What Works

One of the things particularly notable about Sandra Lee is that she didn’t start on social media with the intention of popping zits. She began with Instagram, and according to an article in *New York Magazine*, viewed it as an experiment. She took selfies from different places. She’s very photogenic, so that didn’t hurt, but it’s not as if photographs of attractive people are hard to find online. She made a decision,

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## If certain types of posts or approaches work, do more of them.

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a rather unusual one, to document her work on some of her patients. Without going into how she managed that in terms of permissions and HIPAA issues, she noticed how certain types of posts were being viewed and shared more often than others—videos of her popping pimples, cysts, and blackheads. That’s not something she viewed as a particularly exciting part of her practice, but people were apparently into it.

The point isn’t that you should start asking your patients if you can record and post their procedures, or that “gross” photographs are the way to go. It’s to pay attention to what’s going on with

your social media. If certain types of posts or approaches work, do more of them. If things fall flat, abandon them. And if the whole thing starts to seem like a chore or a waste of time—find something else to do. **PM**



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