

A grayscale photograph of a healthcare professional, likely a nurse or doctor, sitting on concrete steps outdoors. She is wearing scrubs, a stethoscope, and an identification badge. She is looking down at a smartphone in her hands with a slight smile. The background shows a building and trees.

A CLINICIANS GUIDE TO SOCIAL MEDIA

POSTS & PROFESSIONALS RISKS

This guide explains **clinicians' social media responsibilities**, highlighting when **online posts** may create professional, ethical, reputational, or legal liability risks.

CLINICIANS GUIDE TO SOCIAL MEDIA

WHEN DOES A POST BECOME A PROFESSIONAL LIABILITY?

In the last decade, **social media** has become a key part of **everyday life**. What once started as platforms for personal updates and social connections have now become powerful tools for professional branding, public health campaigns, debate, and education. For doctors and dentists in the U.K., this landscape is filled with both incredible opportunities and often-overlooked risks.

Every tweet, LinkedIn article, or Instagram post may feel like it belongs in the informal space of personal expression. Yet, to the outside world – and especially to regulators – the lines between personal and professional identity blur rapidly. Posts can travel far beyond their intended audience and may ultimately affect not only public perception but also regulatory standing, professional relationships, and clinical credibility.

What is covered

➔ Professional liability online

➔ Building a credible profile

➔ Managing social media risk

➔ Using social media positively

Guide written by:
Professor Sam Shah



MDS
MEDICAL DEFENCE SHIELD

WHEN DOES A POST BECOME A PROFESSIONAL LIABILITY?



The turning point from **harmless** posting to **potential liability** often rests in three areas:

- Confidentiality
- Professionalism
- Public Trust

1. Breach of Confidentiality

One of the most common, and serious, pitfalls.

Example: A junior doctor posting an image of an A&E board on Instagram, forgetting patient initials or hospital numbers were visible. Even unintended, this is a regulatory breach.

Example: Dentists sharing “before-and-after” images of patient teeth on Instagram without explicit written consent can trigger complaints to the GDC.

Lesson: Always obtain explicit patient consent for any identifiable content, and remember even case anecdotes posted online can risk identification.

2. Unprofessional Comments

Posts about colleagues, trusts, or the healthcare system can slide into unprofessional territory quickly.

Example: Using Twitter to vent about “incompetent managers” in a named NHS trust could be considered bringing the profession into disrepute.

Example: A dentist making disparaging comments about a competing local practice risks crossing ethical boundaries and exposing themselves to reputational damage.

3. Spreading or Appearing to Support Misinformation

Even a “like” or “retweet” of unverified medical content can be risky.

Example: During the COVID-19 pandemic, some clinicians were investigated for posting unverified claims about vaccine side effects.

Lesson: Clinicians are held to a higher bar. Sharing evidence-based resources matters; amplifying hype poses risks.

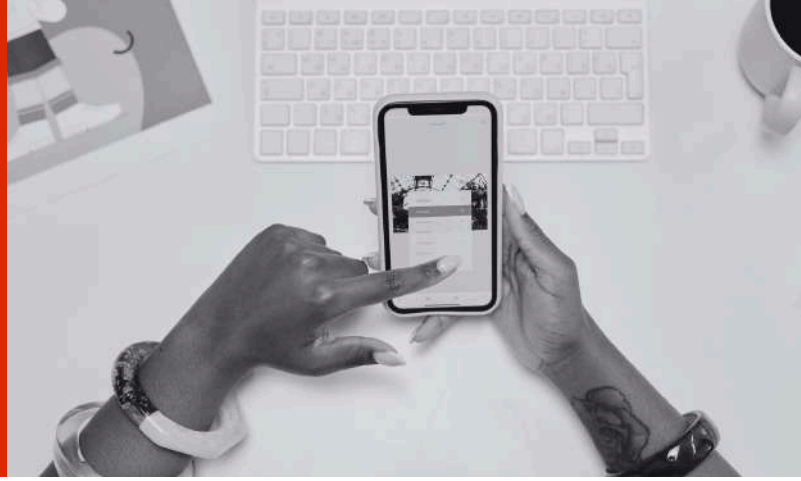
4. Blurred Patient Boundaries

Engaging with patients online outside professional settings can be problematic.

Example: Accepting Facebook friend requests from patients introduces personal-professional overlap.

Example: Engaging in private Instagram direct messages that drift into clinical advice could create medico-legal exposure.

BUILDING A POSITIVE, CREDIBLE ONLINE PROFILE



Despite risks, social media can be leveraged constructively. The question is not whether clinicians should use it, but how to use it responsibly.

CHOOSE THE RIGHT PLATFORM

- **LinkedIn:** Professional networking, thought leadership, reflective writing. Excellent for career visibility.
- **Twitter/X:** Policy debate, rapid exchange of clinical ideas, engaging health media.
- **Instagram:** Oral health campaigns, lifestyle medicine, visual storytelling—commonly effective for dentists.

TikTok: Good for public education, particularly among younger audiences. For example, demonstrating preventive dentistry techniques or myth-busting common health fads.

ADOPT PROFESSIONAL BRANDING

- Use a recognisable profile picture and a clear bio stating your professional role.
- State whether your views are personal. While disclaimers don't absolve professional responsibility, they help distinguish personal voice.
- Consistency in tone and messaging builds credibility.
- Do not use the NHS logo or brand unless you adhere to the NHS brand guidelines.

Watch Sam Shah in our latest video. Here we explore how clinicians can use social media productively, when a post risks becoming a professional liability.

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EXAMPLES OF EFFECTIVE SOCIAL MEDIA USE BY CLINICIANS

- A U.K. GP uses Twitter threads to explain winter pressures, giving the public helpful insight while avoiding criticism of individual organisations.
- Dentists run Instagram campaigns during National Smile Month, highlighting preventive dental tips that reach thousands beyond their patient list.
- Consultants write thought pieces on LinkedIn about digital transformation in the NHS, sparking cross-sector innovation discussions.

CASE STUDIES: WHEN THINGS GO WRONG



It's often easier to learn from mistakes than successes.

- Case 1: A mid-career doctor's tweet about "time-wasting patients" went viral. Though de-identified, the tone was judged unprofessional and disrespectful. The trust investigated and issued a formal warning.
- Case 2: A young dentist shared clinical photos with patient faces blurred but without consent. The patient recognised themselves and complained; the case triggered a GDC fitness-to-practise investigation.
- Case 3: A consultant endorsed a vitamin company online, not realising that posting affiliate links without declaring financial interests could constitute a breach of trust.

Each example underscores how quickly reputational and regulatory risks can escalate.

MANAGING RISK: PRACTICAL STRATEGIES FOR CLINICIANS

To stay on the safe side while maintaining presence, clinicians can adopt a number of practices:

- Pause before posting: If frustrated, angry, or emotional, draft a post but let it sit before hitting send.
- Keep patient communication formal: Redirect queries to official channels—your practice reception, NHS 111, or referral services. Never give personalised medical advice via DM.

- Separate accounts if necessary: Some maintain professional and private accounts, though even "private" accounts can be exposed.
- Know your employer's rules: Many NHS trusts and dental practices have social media policies. Align your usage with them.
- Always fact-check: Especially when posting about new treatments, health risks, or ongoing public health debates.

HARNESSING SOCIAL MEDIA FOR PUBLIC GOOD

The goal isn't just avoiding trouble but actively making a positive contribution.

DOCTORS AND DENTISTS CAN:

- Join national public health campaigns online, such as Child Smile or NHS 75 celebrations.
- Use professional profiles to educate communities about preventive measures—smoking cessation, sugar reduction, or antibiotic resistance.
- Support underrepresented voices by amplifying patient advocacy stories or championing diversity in medicine and dentistry.

A notable example is how GPs and dentists across the U.K. collectively used Twitter during COVID-19 vaccine rollout to counter misinformation. Their trusted presence reassured patients and contributed directly to uptake.

SOCIAL MEDIA AS A FUTURE- READY CLINICAL SKILL



Digital professionalism is fast becoming part of core clinical practice. Medical schools increasingly train students in managing professional boundaries online, while continuing professional development courses now include modules on digital communication.

For dentists, this may mean learning how to deliver oral health campaigns effectively on Instagram or TikTok. For doctors, being able to engage constructively in policy discussions on X without straying into unprofessional conduct may become a necessary career skill.

In the near future, clinicians may be judged not only by bedside manner but also by how effectively—yet responsibly - They communicate in the digital sphere.

FINAL REFLECTIONS

The real risk on social media is not the platforms themselves but unguarded moments of posting that can shift from personal opinion to professional liability. Social media blurs boundaries—between personal and professional, public and private.

For doctors and dentists in the U.K., the safest mindset is this: every post should reflect the standards applied to clinical practice. Confidentiality, respect, integrity, and public trust are the guiding principles. Done well, social media use can enhance reputation, spread vital health messages, and empower career opportunities. Done poorly, it risks professional investigation, reputational harm, and even fitness-to-practice challenges.

Ultimately, clinicians face a choice: to avoid the digital conversation altogether or to engage constructively. But the conversation about healthcare in the digital age is happening regardless. The question is whether clinicians will step forward as trusted, responsible voices—or leave the stage to others less qualified. And so, before posting, ask yourself: Will this build trust in me as a clinician – or could it undermine my profession?

That simple reflection may be the line where a post stays safe – or becomes a liability.