#GeriJC
Manual on Twitter Journal Clubs
@GeriatricsJC

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Modified from:

OVERVIEW

Social media is a novel tool for self-directed medical education. Twitter is one such social media site characterized by short posts of text, pictures, links, and videos. Users select a cohort of people to follow, and Twitter constructs a (mostly) chronological list of these short posts to form a timeline. Twitter is popular among medical practitioners and is being used to disseminate medical research, discuss diagnostic and treatment challenges, and provide emotional support.

The idea of leveraging Twitter to run a medical journal club was first executed by Drs. Natalie Silvey and Fi Douglas, who created TwitterJC. TwitterJC is now defunct, but many of the practices developed by Silvey and Douglas remain a core part of the Twitter journal club experience.

This manual will serve as a descriptive guide that outlines Twitter's workings in general and Journal club via Twitter and would help organize@ GeriatricsJC to meet the perceived needs of the Age-Friendly community.
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INTRODUCTION

- Twitter limits posts to 280 characters. This limit is a critical component of what makes the medium work for a journal club. Tweets must commit to a single succinct point. This limitation means that tweets are rapidly composed and quickly consumed. The character limitation also makes a Twitter engagement feel like an interactive conversation instead of a one-way didactic session. The conversational nature is essential to what makes Twitter a good fit for a journal club.

- The Geriatrics Journal Club, @GeriatricJC, is sponsored by Dakota Geriatrics, a HRSA-funded Geriatric Workforce Enhancement Program. Based at the University of North Dakota Department of Geriatrics and led by Dr. Donald Jurivich, the UND team has had an excellent track record of using Social Media to disseminate and improve Geriatric knowledge with Medical School trainees. This improvement is accomplished using different platforms such as Geriatric Twitter poll, Age-Friendly Twitter, Facebook, and Instagram.

- @GeriatricJC collaborates between University of Illinois at Chicago, University of Michigan, University of Wisconsin-Madison, University of North Dakota and Mayo Clinic, collectively known as the Midwest Geriatrics-Hospice-Palliative Fellowship Consortium. Although the focus is on Geriatrics, the Journal club is open to and actively invites fellows from Hospice, Palliative Medicine, and other fellowship programs.

- Though a journal club cannot create a community de novo, it is an effective way to grow a community. If a journal club has a committed and dedicated core audience, (and it doesn't take more than a dozen) it can become a beacon to draw other like-minded people to its cause and help strengthen a community. One of the most difficult jobs in selling social media to skeptics is describing the power and value of an online community. It is much easier to describe a journal club, primarily because it is a concept familiar to all medical practitioners. Once a person experiences a spirited and active Twitter Journal Club it is easier for participants to see the value of an online medical education community. We think one of the most important achievements of GeriatricsJC has been its role in building the nephrology Twitter community, #Gerijc.
CHAPTER 1: TWITTER 101

Twitter has 330,000,000 active monthly users. Twitter is also home to some of the most vital and active medical discussions. Here we hope to simplify Twitter for novices.

What should I consider before signing up for Twitter?

What devices can Twitter be used on?
Computers, tablets, and smartphones using either Android or iOS

- **Twitter Username**: This is the unique name that Twitter uses to identify you. Many people use a version of their name. The Twitter username can be changed in the future, but some features are broken when that is done. The Twitter username always starts with an @. It is limited to 15 characters and cannot contain spaces. A Twitter handle is a synonym for a username.

- **Twitter Name**: This is another way to identify yourself on Twitter. These names do not need to be unique. We believe that doctors should use their names on Twitter and discourage anonymous accounts. The Twitter name can be changed and does not lead to problems with your account or prior tweets/data.

How do you start a Twitter account?

1. Go to twitter.com and sign up by answering all of the questions.

2. Alternatively, use a smartphone and start by downloading the Twitter app.

3. Follow the prompts and enter the appropriate information.

4. There are three options to customize your account include:

   A. Let others find you by email or phone number. We suggest you do this.

   B. Receive messages from Twitter about your activity and recommendations. We suggest you do this. You can turn this off later if it becomes annoying.

   C. Receive personalized ads. We have no opinion on this.

Getting familiar with some of the conventions on Twitter

@ **Symbol** @ indicates an account on Twitter. @ always precedes a user’s name (i.e., @GeriJC) and can be used to communicate directly with a user. If you are asked a question or want to direct a question to someone, use @
and the recipient will be notified. This works even if the recipient does not follow you back. Adding someone's handle to a tweet will make them notice the tweet and can increase engagement. Adding a long list of handles to a tweet makes it look like spam.

When using @ to direct a conversation with one or more people, keep in mind that this is still a public conversation and can be read by anyone.

**The Hashtag #** A pound sign followed by a word is a way to tag tweets with a subject. Clicking a hashtag will link to all the tweets that contain that same hashtag. This will include tweets by people one does not follow. Hashtags are a great way to find new people to follow.

**How to interact on Twitter**

When you see a tweet that you appreciate there are four ways you can show this appreciation (in order of increasing engagement):

1. **Favorite** it by pressing the "heart" icon. The author will receive a notification that someone liked the tweet.
2. **Retweet** it. Pressing the retweet button will republish the tweet so their followers will see the tweet. The original author of the tweet will receive notification of the retweet. Tweeters love retweets. You can retweet your own tweets.
3. **Reply** to the tweet. Replying to the tweet with one's own comments is a great way to show appreciation of the comment and a way to take the tweet further, develop the ideas, or extend them in interesting ways. The original author is notified of the reply. Important notice: only people who follow both parties (the replies and the original commenter) will see the reply. To make sure all of one can see the reply, use retweet with comment.
   One can reply to oneself. This is the best way to make a point larger than 280 characters and allows the creation of a multi-tweet thread or tweetorial.
4. **Retweet with comment.** This is just like a reply except all of your followers will see the reply, not just people that follow you and the original poster.
CHAPTER 2: USE OF THE HASHTAG 

Hashtags are short, unique words or phrases that label tweets. They are prefixed by the pound sign (#), and cannot include spaces or punctuation. Hashtags allow tweets to be indexed and searchable. They can be used to filter Twitter. The Twitter timeline only shows tweets from people one follows regardless of what they are talking about. When one follows (click on) a hashtag they see people's tweets containing that hashtag regardless of whether they follow the authors or not. For example, clicking on #GeriJC reveals a chronological list of tweets tagged with #GeriJC, but will show no tweets about anything else.

Hashtags work as virtual meeting rooms at a conference. The aim is to ensure that the meeting rooms are general enough so it gains enough participants to provide a robust conversation while being specific enough that the discussions are focused on subjects of interest. Unlike actual conferences, these discussions remain active, as long as the particular hashtag continues to be used.

A Twitter journal club needs a hashtag and only one hashtag that doesn't change chat to chat. The hashtag is a primary part of the journal club's identity. It is important that a journal club select a unique hashtag that will not be contaminated by others using it outside of the journal club discussion. For this journal club, this is #GeriJC.

“Do not forget to tag your tweets in the journal club discussion with #GeriJC”
CHAPTER 3:

In order to participate in a Twitter Journal club, one needs to reorient the Twitter client so that instead of following a timeline it follows the Journal Club's hashtag.

THE STRUCTURE OF GERIJC

Step 1. Assign a fellow/program as the host program of the month.

Step 2. Before the JC day: The fellow will choose an article and send it to the moderators (Gunjan Manocha and Casey Morton). Fellow will also record a 2-5 min video outlining key points of the selected journal article to be presented. Moderators should receive this video 1 week prior to the day of the Journal club. Moderators will forward the article to all programs 1 week prior to the day of Journal club.

Step 3. On the day of JC. The journal club discussion will be open at 12 pm CT, 1st Tuesday of the month and follow a standard twitter chat.

Here is a brief outline of the chat.

Introductions and Focus Zero: This would be completed at the moderators’ end (Gunjan Manocha and Casey Morton).

- Remind everyone to use the hashtag #GeriJC.
- Ask people to introduce themselves and reveal any conflicts of interest (COI).
- Have the topics of discussion ready to be posted.

Focus One: The pre-recorded video will be posted. The host fellow should have points describing the methods and key results ready to be posted as well as in the video, but the host's role is not to be didactic here. Try to present some aspect of the methods and then follow it with a question for the audience. The goal as the host is to guide the audience through the article but leave it to the participants to make the brilliant observations. The key to a successful journal club is audience engagement and interaction. Occasionally, if the topic being discussed is controversial, background information can be discussed to understand the context of the study.

Focus Two: Topics of discussion will be posted every ten minutes to start the engagement of the paper. Talk about the results of the study being discussed. You can include figures, tables, or text with your tweets. The topics of discussion will include but are not limited to:

- T1: What are the most interesting aspects of the paper?
• T2: Were the analytical approaches used in the study appropriate?

• T3: Does the study add new knowledge to establish foundations?

• T4: What are the weaknesses of the study (design)?

• T5: How would you introduce the findings in your practice?

If you are directly replying to any of these topics of discussion, you can start your tweet with the topic # as T1, T2, T3, T4 or T5. You would continue to type in #GeriJC in your tweets.

**Closing Statements:** The moderator asks the participants for their final thoughts about the discussed article. Also remind those participating in the chat of the importance of following others in the chat to build their personal learning network.

The host can try to guide the discussion, but the chats may take on a life of their own and branch off into unexpected directions. That is okay. The host should do his or her best to guide it, but shouldn't worry if an active discussion takes an unexpected diversion.
CHAPTER 4: POST-CHAT FOLLOW UP AND ARCHIVING THE CHAT

The Geriatrics Twitter Journal club is largely designed to be delivered as a live performance. When people stumble across the discussion days or weeks later it is difficult to piece together what was said and what was meant during the chat. In order to take care of this we curate the chat so it can be better accessed at a later date and continue to provide educational value.

You can view the archived Twitter Journal club sessions at www.dakotageriatrics.org
CHAPTER 5: ETIQUETTE

Etiquette is a set of guidelines for politeness and good manners, the kindesses with which we should always treat each other. Twitter journal clubs have their own customs and etiquette to be productive, educational, and inviting environments.

Twitter Journal Club Etiquette 101

GeriJC does not have a published code of conduct but these are some principles that we use to guide our own behavior and that we think result in a productive and supportive environment for scientific discourse.

Be honest/transarent. Disclose conflicts of interest (COI) early on in the discussion. Sometimes a user will use an alternative handle. This happens when someone hosts a Twitter chat or journal club and uses the organization's handle (@GeriJC). The author should announce their identity. Do not hide behind the name of an organization.

Be professional. While social networks may “feel” like informal settings, they should be regarded with the same respect as any public place of business. If you would not say something in a work setting, do not say it online.

Be positive and genuine. Maintain a positive tone and attitude. There is no need for negativity and condescending posts. If you find you are becoming emotional as a result of an interaction, pause and reflect before replying. Not every interaction requires a response.

Be literate. Avoid posting with poor spelling, inaccurate punctuation, or substandard grammar. Carefully choose words that sharply and accurately convey your intentions. Proofread all tweets before sending them. Be your best.

Be respectful. Not all of us agree all the time, but disagreement is no excuse for poor behavior and manners. We may experience frustration now and then, but we should not allow that frustration to turn into personal attacks. It is important to remember that a community where people feel uncomfortable or threatened is not a productive one. You do not want to be, or even perceived to be, a bully or closed-minded.

Be polite and straightforward. Online conversations, like texting, have challenges. Often conversational nuances and subtle shifts in tone are lost in the translation to text. This leads to misinterpretation of intent. Irony and sarcasm are easily missed. Be careful when using these techniques. Often tweets can be taken out of context to the embarrassment of the writer. This is why it is important to consider how posts will be read and perceived before sending them. We all have opinions; some people are more opinionated than others, however, realize that social media opens you up to instant scrutiny/criticism.

Be mindful of the larger audience. During an active tweet chat, the apparent audience is people that are actively tweeting. However, there is a larger audience of people who are listening but not otherwise engaging. This may
include patients, family members, or people with less sophisticated medical knowledge. Be mindful of this larger group and avoid statements that may confuse or insult them. What is an arbitrary outcome to you maybe the death of a child to them. Remain professional. Avoid providing medical advice. Do not answer medical questions or engage in clinical conversations with patients. Create or adapt a blanket statement like, "Please address this with your health professional." or "I'm a doctor on Twitter but I'm not your doctor on Twitter."

**Be friendly and fun.** We are doing something exciting and different. Many are watching and looking to be involved. We are leaders and our behavior should encourage others to want to get involved!

**Apologize.** Occasionally you may tweet something we suggest you should not, and regret it. It is human to make mistakes. Just delete, apologize, or clarify as appropriate.
## APPENDIX 2. LIST OF TWITTER JOURNAL CLUBS

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
<th>Twitter ID</th>
<th>Hashtag</th>
<th>Active / date of last chat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Twitter Journal Club</td>
<td>5/2011</td>
<td>@twitjournalclub</td>
<td>#twitjc</td>
<td>Inactive (12/13)</td>
</tr>
<tr>
<td>Public Health Twitter Journal Club</td>
<td>8/2011</td>
<td>@PHTwitJC</td>
<td>#PHTwitJC</td>
<td>Inactive (8/13)</td>
</tr>
<tr>
<td>British Journal of Obstetrics and Gynaecology Journal Club</td>
<td>5/2011</td>
<td>@BlueJCHost</td>
<td>#bluejc</td>
<td>Active</td>
</tr>
<tr>
<td>Microbiology Twitter Journal Club</td>
<td>5/2012</td>
<td>@microtwjc</td>
<td>#microtwjc</td>
<td>Inactive (1/16)</td>
</tr>
<tr>
<td>St Emyn's Journal Club</td>
<td>10/2012</td>
<td>@JC_StE</td>
<td>#JC_StE</td>
<td>Inactive (9/14)</td>
</tr>
<tr>
<td>Urology Journal Club</td>
<td>11/2012</td>
<td>@iurojc</td>
<td>#iurojc</td>
<td>Active</td>
</tr>
<tr>
<td>Evidence Based Nursing Twitter Journal Club</td>
<td>1/2013</td>
<td>@EBNursingBMJ</td>
<td>#ebnjc</td>
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</tr>
<tr>
<td>Hospice and Palliative Care medicine</td>
<td>2/2013</td>
<td>@hpmjc</td>
<td>#hpmjc</td>
<td>Active</td>
</tr>
<tr>
<td>Archives of Disease in Childhood's Journal Club</td>
<td>6/2013</td>
<td>@ADC_JC</td>
<td>#ADC_JC</td>
<td>Inactive (4/16)</td>
</tr>
<tr>
<td>Respiratory and Sleep Medicine Journal Club</td>
<td>10/2013</td>
<td>@respondsleepjc</td>
<td>#rsjc</td>
<td>Active</td>
</tr>
<tr>
<td>Academic Life in Emergency Medicine Journal Club</td>
<td>11/2013</td>
<td>@M_Lin</td>
<td>#ALiEMJC</td>
<td>Inactive (3/15)</td>
</tr>
<tr>
<td>General Surgery Journal Club</td>
<td>2/2014</td>
<td>@igsjc</td>
<td>#igsjc</td>
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<tr>
<td>Primary Care Medicine Journal Club</td>
<td>2/2014</td>
<td>@pcmjc</td>
<td>#pcmjc</td>
<td>Inactive (3/14)</td>
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<tr>
<td>Allergy Journal Club</td>
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<td>#allergyjc</td>
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<td>#nephjc</td>
<td>Active</td>
</tr>
<tr>
<td>iForumRx Online Journal Club</td>
<td>5/2014</td>
<td>@iforumrx</td>
<td>#iforumrx</td>
<td>Active</td>
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<tr>
<td>Radiation Oncology</td>
<td>8/2014</td>
<td>@rad_nation</td>
<td>#radonc</td>
<td>Active</td>
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<tr>
<td>Geriatric Medicine Journal Club</td>
<td>8/2014</td>
<td>@GeriMedJC</td>
<td>#GeriMedJC</td>
<td>Active</td>
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<tr>
<td>International Psychiatric Journal Club</td>
<td>12/2014</td>
<td>@PsychiatryJC</td>
<td>#PsychJC</td>
<td>Inactive (6/15)</td>
</tr>
<tr>
<td>Duke Anesthesiology Journal Club</td>
<td>1/2015</td>
<td>@Duke_Anesthesia</td>
<td>#AnesJC</td>
<td>Active</td>
</tr>
<tr>
<td>Name</td>
<td>Date</td>
<td>Twitter ID</td>
<td>Hashtag</td>
<td>Active / date of last chat</td>
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<td>Rheumatology Journal Club</td>
<td>2/2015</td>
<td>@RheumJC</td>
<td>#RheumJC</td>
<td>Active</td>
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<tr>
<td>Amyloidosis Journal Club</td>
<td>10/2015</td>
<td>@Amyloid_Planet</td>
<td>#amyloidosisJC</td>
<td>Active</td>
</tr>
<tr>
<td>GIM Journal Club (General Internal Medicine)</td>
<td>12/2015</td>
<td>@GIMJClub</td>
<td>#GenMedJC</td>
<td>Active</td>
</tr>
<tr>
<td>General Practice Journal Club</td>
<td>1/2016</td>
<td>@GPjournalclub</td>
<td>#GPJC</td>
<td>Active</td>
</tr>
<tr>
<td>EAST Journal Club (trauma surgery)</td>
<td>5/2016</td>
<td>@EASTjournalclub</td>
<td>#EASTjc</td>
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<tr>
<td>Pathology Journal Club</td>
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<td>@PathJC</td>
<td>#PathJC</td>
<td>Active</td>
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<td>Family Medicine Online Journal Club</td>
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<td>@FamilyMedJC</td>
<td>#FamilyMedJC</td>
<td>Active</td>
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<td>International Pediatric Nephrology Journal Club</td>
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<td>@IPNA_PedNeph</td>
<td>#IPNAJJC</td>
<td>Active</td>
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<td>Twitter Echo Journal Club</td>
<td>11/2017</td>
<td>@ASE360</td>
<td>#ASEchoJC</td>
<td>Active</td>
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<tr>
<td>Intensive Care Medicine Journal Club</td>
<td>2/2018</td>
<td>@ICMJC</td>
<td>#ICMJC</td>
<td>Active</td>
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<tr>
<td>Pediatric Hospital Medicine Fellow Journal Club</td>
<td>9/2018</td>
<td>@STangGirdwood</td>
<td>#PHMFellowJC</td>
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