

FROM THE REGIONS

#SGIMNW16: Population Health, Challenging Assumptions, Bedside Ultrasound, and... Tweeting(!)

Avital Y. O'Glasser, MD, FACP, and Chris Wong, MD

Dr. O'Glasser is assistant professor, Division of Hospital Medicine, Department of Medicine, at Oregon Health & Science University, in Portland, OR, and Dr. Wong is associate professor, Division of General Internal Medicine, at the University of Washington in Seattle, WA.

Here in the Pacific Northwest, the 2016 NW Regional SGIM Meeting continued to showcase the enthusiasm and innovation of our very active SGIM community. The meeting's theme was "Engaging in Healthy Communities." With 43 posters, five workshops, 15 planning committee members—not to mention countless hours volunteered by reviewers, judges, and presenters—our 128 conference attendees were indeed engaged from the get-go. With the regional conference continuing to grow in size, the meeting was held at the elegant Hotel 1000 in Seattle, WA. This was also the region's first year to live-tweet the meeting and engage its online professional community through the dedicated hashtag #SGIMNW16. In keeping with the theme of this month's SGIM *Forum*, the content and impact of the live-tweeting of the meeting will be incorporated into the narrative of this update.

Dr. Daniel Lessler, the chief medical officer of the Washington State Health Care Authority, gave the first plenary talk, titled "Pursuing the Triple Aim in Washington State." Discussing the transformation of health care in the state's public employee and Medicaid population, he focused on behavioral health integration, eliminating barriers to mental health care, standardizing targets, and organizing the state into health care communities. He also highlighted the success of the Affordable Care Act in Washington State, which dropped the uninsured rate from 16.8% to 6.4%, while confirming that there was more work to be done. He stated, "Unless we fundamentally change how we do things,

we won't be able to afford what we've just done." His talk prompted several tweets, including tagging of @POTUS, @BarackObama, and @obamacare.

The second plenary speaker, Dr. H. Gilbert Welch of the Dartmouth Institute (@DartmouthInst), challenged us to consider and communicate "Seven Assumptions that Drive Too Much Medical Care." Attendees received a copy of his book bearing the same title. In an interactive and dynamic session, Dr. Welch pushed participants to consider how much benefit versus risk commonly performed interventions and screenings actually provide for patients. His talk built upon a framework of assumptions in our current medical structure, including "action is always better than inaction," "it is always better to fix the problem," "it never hurts to get more info," and "sooner is always better."

We had rousing case-based outpatient and inpatient medicine updates. Drs. Lisa Inouye (@inouyelisa) and incoming NW regional president) and Jared Klein addressed the ongoing dilemma of statins for primary prevention, metformin in mild chronic kidney disease, and resistant hypertension among key clinical teachings. Drs. Neil Argyle and Paul Cornia addressed perioperative anticoagulation including the BRIDGE trial, workup of unprovoked pulmonary emboli, the use of steroids in multiple illnesses, and other important pearls.

This meeting also featured another first—the first time a bedside ultrasound workshop was held at the NW Regional SGIM Meeting. The workshop was led by Dr. Renee Dversdal (@ReneeDversdal)

with the assistance of faculty and residents from OHSU (@OHSUIM-Res) and University of Washington (@UWMedicine). Medical student volunteers from the University of Washington served as standardized patients for six rotating ultrasound stations focusing on different organ systems ranging from cardiopulmonary to musculoskeletal exams. Dozens of meeting participants attended this very valuable hands-on intro session.

Dr. Susan Merel (@SusanMerel) received the Excellence in Clinician Education award for her passionate work in hospital medicine, geriatrics, and palliative care. Dr. Lauren Beste (@BesteLauren and meeting chair) received the Excellence in Clinician Investigation chapter award for her innovative research in liver disease. Trainee awards went to Dr. Natalie Freidin (chief resident at Providence St. Vincent's in Oregon, @ProvHealth) for her research/innovations poster; Katy Lawson (OHSU MS3, @OHSU-SOM) for her clinical vignette poster; and Dr. Courtney Tugel (University of Washington) for her oral clinical vignette. Needless to say, proud home institutions tweeted or re-tweeting congratulatory tweets! In the past two years, Drs. Joe Simonetti and Torie Johnson have pioneered mentoring for resident and medical students in our region. Many of their mentees produced stellar quality posters and oral presentations. We plan on continuing this program in the future.

The real-time social media component of the meeting added another dimension of energy and excitement to the meeting. About a month before the meeting, the Na-

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tional SGIM Office (@SocietyGIM) registered the meeting hashtag #SGIMNW16 with Symplur® (symplur.com), which runs the “Healthcare Hashtags Project.” Our goal was to use this connectivity to share, spread, and celebrate the meeting’s contents and pearls. Tweeting started well in advance of the conference and included information about the extension of the

online registration deadline. At a dinner the night before the meeting, multiple members of the planning committee quickly followed each other on Twitter or created Twitter accounts for the first time. This effect on peer-to-peer bonding quickly spread to peer-institution connectivity during the meeting sessions. Faculty and their affiliated institutions were championed, and the

ability to tag national organizations or public figures such as the Dartmouth Institute and President Barack Obama cemented for us the impact of Twitter on engagement and connectivity. Updates from the National SGIM Office over lunch reminded us of the #ProudToBeGIM campaign. Tweeting continued the day after the meeting as well as the Monday following (see graph).

Thanks to the Healthcare Hashtags analytics, we were able to analyze the impact of our first year's efforts. @SocietyGIM received the most mentions (79), and our Twitter champion @aoglasser tweeted 54 times. We averaged eight tweets per hour and five tweets per tweeter. To put this in perspective, #SGIM15 at the National Meeting last year averaged 22 tweets per hour for the four-day conference and four tweets per Twitter participant, with 2,075 tweets total! In total, since creation of the hashtag, there have been 129 tweets, including retweets and modified tweets, involving 27 participants—a pretty good first foray into live-tweeting for the plucky Pacific NW Region!

Thank you to all who attended, our reviewers, the planning committee (meeting chair Lauren Beste, Bill Weppner @weppnerw, Mike Krug (@MikeKrugMD), Lisa Inouye, Carol Sprague, Chris Wong @ChrisWongMD, Anna Golob, Meghan Kiefer, Ginger Evans, Victoria Johnson, Jared Klein, Erin Bonura, Avital O’Glasser, Chen Wu, and Leah Wilson); National SGIM Office support (Tracey Pierce and Candace Goggans); and all our judges and distinguished faculty. See you next year for #SGIMNW17 in Portland!

