

# Hospital Review

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## How Facebook Helped One Neurosurgeon Diagnose and Treat a Comatose Patient: Q&A With Dr. Kamal Thapar of Sacred Heart Hospital

Written by Laura Miller | [June 21, 2011](#)

Hundreds of millions of people use social media every day, whether it is Facebook, Twitter or another forum for communication. Kamal Thapar, MD, a neurosurgeon with the Marshfield Clinic and medical director of neurosurgery and tertiary care services at Sacred Heart Hospital in Eau Claire, Wis., recently used a comatose patient's entries about her medical history that she detailed on her Facebook page to help diagnose and treat her successfully. "Given its widespread usage in communication and commerce, sooner or later, social media will likely also evolve to have application in medicine as it is now the currency of communication on the planet," says Dr. Thapar.

He discusses his experience with social media and its use in the present and future medical world.

### **Q: How did the patient arrive at the hospital and what happened once she was there?**

**Dr. Kamal Thapar:** The patient had been unwell for about a month, having been in and out of various hospitals; she wasn't doing well. She went to see several physicians and visited ERs, but the cause of her illness remained elusive. She arrived at Sacred Heart Hospital, and shortly thereafter slipped into a deep coma. She was unresponsive and hemiplegic on the left side. You couldn't extract any history from her because she was comatose and dying. We did a CT scan and were able to see that she had a massive stroke in one hemisphere of her brain, but multiple smaller strokes in the other. This was distinctly unusual for an individual so young.

All that could be ascertained was that there was a one month history of fever, chest pain and respiratory issues, cursory details of which I could obtain from the family. I contacted the other hospitals for her medical records. Each different hospital had its own EMR, and none could electronically communicate with Sacred Heart. I asked for the information to be faxed from the other hospitals, but that wasn't a timely solution as the patient needed emergent surgery

**Q: Why is it so important to know the patient's history before diagnosing and treating a problem, even in an emergency?**

**KT:** In medicine in general, and in neurology in particular, so much of our ability to correctly diagnose disease and establish a treatment plan, begins by obtaining an accurate history from the patient. Imaging and other laboratory tests are also critical confirmatory steps, but ultimately the determination of what is wrong and how to treat it begins with what the patient tells us in their own words. If one is robbed of the patient/physician experience, and one is forced to rely only on laboratory data, a critical piece of the puzzle remains missing. Not infrequently, patients may have the same laboratory and imaging findings, yet the ultimate arbitrator of what is to be done is revealed only after carefully listening to the patient and performing a thorough physical examination. The imaging and lab tests from 10 people might be the same, but each person would undergo a different and individualized treatment plan based on factors such as age, occupation, therapeutic goals, comorbidities, etc.

**Q: How did social media help you diagnose and treat your comatose patient?**

**KT:** I knew the patient needed emergent surgery and her family couldn't give me anything but cursory information; critical details of her month-long illness remained elusive. As a last effort, her son recalled that she wrote liberally on her Facebook page about many personal things, including her medical problems. He logged me onto his Facebook account and accessed her wall (Facebook page). I was able to see her diary-like entries in her own words about all she was going through during the prior month. Each entry was accurately timed and dated, and revealed exactly what was experiencing.

In an initial entry, she described having chest pain and shortness of breath and that she was going to the emergency room. Six hours later, there was another entry detailing her visit to the emergency room, the diagnosis that she was given, and the specific medications that she had received. The next series of entries indicated that she was having ongoing chest pain, and she had been airlifted to another facility where they performed a series of comprehensive tests that lead to the diagnosis of a problem in her heart which proved to be the source of the multiple strokes that she was having.

In a matter of only 2-3 minutes, this information explained the basis of the patient's multiple strokes and cause of her month long illness. Whereas this woman was in dense coma and couldn't tell me what was wrong, her facebook page proved to be a treasure trove of information that provided critical information that she was physically incapable of providing and that I couldn't obtain from elsewhere in a time-sensitive fashion.

While it's true that the information from her Facebook page didn't change what I was going to do, it gave me the background information I couldn't have gotten from another source. I operated on her and then she was able to go through rehabilitation. Her story is illustrative of the potential power of social media.

**Q: You were able to use social media to help you in this case, but these types of patients aren't terribly common. Are there ways you see social media having a positive impact on the physician/patient relationship in the future?**

KT: There are many ways patients and physicians can use social media to the benefit of the patient. Some patients may not be comfortable revealing information in the office, so they can keep a "medical diary" of sorts using social media and relay their information to physicians that way. There is a very interesting social divide in how willing people are to share information. I'm not advocating that we use Facebook as an electronic medical record, but if the patients choose to make certain relevant information available to their physicians, it may help in rendering diagnoses and treatments. Sometimes, when patients come to see me, they bring me their entire past medical history accurately and comprehensively assembled, and they don't have to recall it. This often is more accurate and key details are less likely to be missed, particularly in the elderly patient. I can see eventually having a portal on the internet where patients could put their medical history to share with physicians if they choose to do so.

The technology for a personal, secure, portable and privacy-compliant portal to maintain one's personal medical record certainly exists. It is only a matter of time when the appropriate platform or "app" will emerge that will allow patients to maintain their personal medical information, ready to be efficiently transmitted to the provider of their choosing either electively, or as in this case, emergently. Because this allows patients to maintain both some responsibility and autonomy over their medical records, it may be an attractive option for some patients.

*Learn more about [Dr. Kamal Thapar](#).*