ESC SoMe Guidelines

Best practice

Updated July 2023
Best practice

Find colleagues and topics of interest to **engage with the wider community**

**Engage with your peers** but refrain from interacting with/giving advice to patients

**ESC official language is English.** The aim is to make Congresses & discussions around them available to all

**Give credit where it’s due:**
- quote/tag speakers/authors
- add references to support your view

Always aim for **quality over quantity.** One powerful/catchy post has more impact than several posts without a clear message/highlight

**Double check the post content** before posting to avoid typos/broken links/other mistakes

**Most important rule of all:** no identifiable patient details. If you post cases, make sure you have patient consent for educational purposes on social media
Best practice

Don’t modify ESC branding (logos, visuals, etc.)

Apply the same ethics & etiquette you would in any other context

No diffamation, racist posts, nothing that fosters hatred or ill-will

Avoid using ESC hashtags for unrelated posts (i.e., for your personal/fun posts)

Avoid posting anything that might appear as a conflict of interest. Be neutral

Don’t use any visuals which are not yours, if permission not granted

Don’t break ESC confidentiality/embargo ESC posts first
How to engage on social media

Thanks to hashtags, Twitter tends to be the preferred channel for real-time scientific exchange with anyone, whether connected with them or not

- Post **new** data & scientific resources
- When you post, or reply to others’ posts: **use hashtags when appropriate and/or tag your peers**
- **Use visuals** (images/video/gif): they are more appealing to the community than just plain text posts
- If you comment on **scientific content**, **add the resource/reference** that supports your view, when applicable.
- If you do **promotional posts** (upcoming events, webinars, congresses, etc.) adding a **personal note/scientific reason** explaining why people should join, will help followers relate to you
- Posting cases: no patient data; obtain their consent
- **Live-tweeting at congresses**: take screenshots of key points to support your tweet content. Use the Microsoft Office Lens mobile app to take photos of slides. **NO video recording & posting**
Twitter ‘twips’ 😊

• Get to the point/key message. Start the post with the most interesting info. Be catchy!
  You got only 280 characters!

• Save characters: you can tag up to 10 Twitter profiles into your images (not possible on a video) instead of tagging them in the text

• Be creative. Why not try some polls or Twitter threads?

• Aim for discussion creation

• You can upload up to four images per tweet

• You can upload one video per tweet (MP4 on desktop/MP4 or MOV on mobile). Max length 2.20 min.

• To convert videos to MP4 you can use https://webservice.online-convert.com/convert-for-twitter

• To convert videos to Gifs you can use EZGif https://ezgif.com/video-to-gif
ESC hashtags

Use them whenever posting on ESC resources that contain these topics/are useful for these communities

#ESCGuidelines #ESCDigital
#ESCBasicScience
#ESCCardioEd #ESCCardioOnco #ACVC_ESC #EHRA_ESC
#ESCStroke #ESCHypertension #ACNAP #EAPCI #EACVI
#ESCGenomics #ESCPharmacotherapy #EAPC_ESC #HFA_ESC
#ESCAbstract #AcademyESC #ESCYoung #ESCSoT
ESC Congresses hashtags

• EHRA Congress: #EHRA2024
• Acute Cardiovascular Care: #ACVC2024
• ACNAP: #ACNAP2024
• Heart Failure: #HeartFailure2024
• ESC Preventive Cardiology: #ESCPrev2024
• Frontiers in CardioVascular Biomedicine: #FCVB2024

• ICNC-CT: #ICNCCT2024
• ESC Congress: #ESCCongress
• EuroPCR: #EuroPCR
• EuroEcho: #EuroEcho2024
If you’re not already on Twitter...

Set Up a professional Profile
• You can pin a tweet (it can be a post you wish to highlight when people visit your profile).

Follow organisations of interest and your peers
• Watch what the others are doing

Engage with peers/create discussion
• Retweet if you agree /endorse their message. But aim for a quote if you want to expand that discussion further
• Like, reply, comment
• Spark healthy debate, ask questions by mentioning your peers/experts in the field
• Tweet your own take on recent publications, trials, interesting cases, etc.
• Avoid biased posts towards industry. Be neutral
Popular topical hashtags

All things cardiology #cardiotwitter
Atrial Fibrillation #AFib
Cath Lab #CathLab
Cardio-Oncology #Cardioonco #cardioonc
Acute Coronary Syndrome #cvACS
Coronary Bypass Surgery #cvCABG
Congestive Heart Failure #cvCHF
Echocardiography #cvEcho
Electrophysiology #LQTS

Heart Failure #HF #heartfailure
Congenital Heart Diseases #Congenital #CongHD #CHD
Cardiovascular Disease #CVD
Hypertrophic Cardiomyopathy #cvHCM
Cardiovascular Prevention #CVPrev #cvprevention
Sports Cardiology #SportsCardiology
Left Atrial Appendage Closure Device #LAAoccluder
Pulmonary Hypertension #PAH #PHTN #PulHTN
Pediatric Cardiology #PedCardio #PediatricCardiology
CV surgery #CVSurg #CardiacSurgery #OpenHeart
Valvular Heart Disease #VHD
Anticoagulation #cvCoag #anticoag #coagulation #NOAC
Venous Thromboembolism #cvVTE #thromboembolism
Stroke #Stroke
Popular topical hashtags

Cardiovascular Imaging #CVRad #CVImaging #CVI #cardiacimaging
Cardiac MRI #whyCMR
Echo #echofirst
Cardiac CT #whyCT
Nuclear Cardiology #cvnuc
Dual Antiplatelet Therapy #DAPT
Electrophysiology #EP #electrophysiology #EPeeps
Cardiac Resynchronization Therapy #epCRT
Implantable Cardioverter Defibrillator #epICD
Permanent Pacemaker #epPPM #PaceMaker
Ventricular Tachycardia #epVTVF #VT #VF #Vtach #Vfib
Procedures #[procedurename], e.g. #Fontan #CABG
HF with preserved EF #HFpEF
HF with reduced EF #HFrEF
Long QT Syndrome #LQTS
Left Ventricular Assist Device #LVAD

MitraClip #MitraClip
Non-ST elevation MI #NSTEMI
PCSK9 therapy #PCSK9
Statin #Statin #Statins
ST elevation #STEMI
Transcutaneous Aortic Valve Replacement #TAVR #TAVI #cvEP
Dual Antiplatelet Therapy #DAPT
Geriatric Cardiology #cvGeri
Endocarditis #Endocarditis
Ablation #epAblation
Fontan Circulation #Fontan
Aortic Stenosis #vhdAS
Hashtags (#) and tagging

• Before you decide if you want to tweet and be seen in a particular hashtag, check the tweets in it first (good debate, no spammy posts, etc.)

• In the ‘Search’ bar at the top of your newsfeed, look at both “Latest” and “Top” tabs and see how and when a # has been used. The latest tab is the best so you can see what are the most recent discussions on a topic)

• You can be a passive user too and just stay up-to-date by checking hashtags to see what are the latest ‘news’ or discussions in your area of interest. But that would be a shame 😊 Do engage with your peers, new connections and friendships can form on Twitter every day

• Don’t over use hashtags. We recommend max 4/5 hashtags per post. Be natural and don’t ‘force’ it.

• When tagging other profiles in the tweet content: go for a few names, to avoid looking spammy. Try a combination of peers in the same topic and also Influencers in the wider CV sphere, to get a higher chance for a RT and visibility
Other social media channels

• Follow the ESC accounts and interact with the content (react, comment, share)
  • ESC Facebook
  • ESC LinkedIn
  • ESC Instagram

Facebook/LinkedIn Groups:
• Join group(s) from your interest/specialty and keep the conversation alive by sharing new resources, posting comments, questions etc

Managers/contributors to an ESC FB/LinkedIn group:

✓ Regularity is the key: keep the conversation going in the groups you manage/contribute to
✓ Use visuals/videos to attract audience’s attention
✓ Your info should be new & relevant to the audience (impact their practice)
✓ Answer promptly to the community questions

With ESC Staff support:
✓ Moderate comments following best practice
✓ Manage the membership approval

Reminder: most important rule of all: NO patient data