The Content of Family Physicians' Online Videos and Biographies

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BACKGROUND AND OBJECTIVES: Finding information about new physicians can sometimes be challenging. The purpose of the current study was to determine if the information and qualities prospective patients want to know about family physicians, before selecting one to visit, are present within videos placed in their online biographies.

METHODS: More than 150 family physician videos, and their accompanying text biographies, were coded from 20 health systems within the United States. Videos and biographies were coded for the presence or absence of 50 pieces of information (eg, was a philosophy of care mentioned, were personal hobbies/interests noted?).

RESULTS: The majority of videos (80.4%) contained the doctor's philosophy of care. Nearly half (47.7%) contained at least one piece of personal information about the doctor (ie, where the doctor is originally from, the doctor's marital status, the number of children the doctor has, other family members the doctor has, the doctor's religion/faith, and personal hobbies/interests). Only 30.7% of videos showed footage of the doctor's office, and 25.5% showed footage of the doctor interacting with a patient.

CONCLUSIONS: The full potential of video is not being utilized by health systems in constructing videos of their physicians to place alongside online biographies. Previous research indicates patients want to know not only what a doctor's office looks like but also how that doctor will treat them in a consultation. The inclusion of footage of the doctor's office, as well as of the doctor interacting with a patient, could help to reduce the uncertainty and apprehension sometimes present when choosing a new physician.

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Trying to find a new family physician is not always an easy task. Yet, it is a decision millions of people are tasked with every year for numerous different reasons (eg, the patient moves; the doctor moves, retires, or dies). People also might be shopping for a new physician simply because they are dissatisfied with their current providers.[1-4] However, providers do not always make it easy to help prospective patients make an informed decision of who they want to visit for the first time. Many studies find that important qualities people look for in a new physician are the doctor's approachability, bedside manner, and interpersonal skills.[5-8] However, information provided by physicians and their managed care organizations rarely ever have this information available for patients to find.[9] Patients have little opportunity to observe or "kick the tires" of medical care before they make a purchase.[10] Visiting with multiple doctors before patients decide who their family physician will be can help them find a doctor that best fits all their needs and wants. However, interviewing numerous doctors is very time consuming for both physicians and potential patients and is certainly not cost effective.[1,11]

With the web now being a popular place to seek health related information,[12] providers are beginning to offer these interviews to potential patients in the form of online video introductions of their physicians. While not yet the norm, a small percentage of health systems have begun placing candid videos of their physicians on their web sites, rather than simply text-only biographies, to help patients make more informed choices. This study analyzed more than 150 online biographies and videos of family physicians, from 20 health systems across the United States. The goal of the study is to determine if health care organizations are giving prospective patients

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the information they would like to know to help them in their decision making processes. Because the choice of which health care system a patient can visit is usually limited by that patient's insurance provider, systems and physicians should be providing more information to patients about the decision they do have a choice in making, namely the doctor they would first like to visit within that system.[13] The following sections will provide a brief review of the literature regarding patients' physician seeking, how videos can play an effective role in that process, research questions, the methods and sampling frame of the biographies analyzed, and the results from the study. The manuscript concludes with a discussion that focuses on recommendations for health systems and physicians in formulating their future biographies, as well as directions for future research on this topic.

Literature Review and Research Questions

The primary source people use when seeking information about new physicians is family and friends.[3,14] However, seeking information from others would be difficult for people who have just moved or do not have family and friends in their areas. Plus, in larger cities with an abundance of physicians, even if a person did have family and friends to consult, those family and friends likely would not know information about the majority of doctors in the area, which would not allow prospective patients to gather complete information about all potential options available to them.[15]

The one attribute patients usually say they find most important in a family physician is the doctor's interpersonal communication skills.[4-6,16] Patients want a physician who is friendly and easy to relate to.[7] Sometimes patients even rank a physician's communication skills over a doctor's expertise.[15,17,18] Because interpersonal skills are so highly ranked by patients, it would

seem plausible that health care providers would place information about how their doctors interact during consultations within their biographies. Such information could be placed in a section about a doctor's philosophy of care. However, Perrault and Smreker[9] did not find this to be the case. In their content analysis of more than 1,400 family physician biographies from 152 US health care systems, the most popular pieces of information mentioned were the address of the doctor's clinic (93.6%), where the doctor went to medical school (80.8%), performed residency (73.7%), and the doctor's board certification (71.4%). Only 7.7% of biographies provided a philosophy of care, and just 3.1% provided a video introduction of the physician.[9] This lack of information could be why Razzouk, Seitz, and Webb[4] found that 61% of individuals who had to recently choose a primary care physician rated the information provided to them via health systems about their physicians to be inadequate.

Videos Could Help

Media richness theory[19] lends the guidance that the addition of videos to doctors' online biographies could help patients make more informed choices. The theory posits that when organizations send messages, richer media (eg, face-to-face, video conferencing) should be more effective for receivers than leaner media (eg, text-only emails, letters). Richer media, like videos, can carry much more information (eg, both visual and audio cues to enhance understanding). A video of the doctor introducing him or herself would help the patient hear how the doctor speaks, as well as learn many nonverbal cues of the doctor that could not be gleaned from a text-only biography.

For example, Engstrom and Madlon-Kay[5] found that nearly 98% of their sample found it very important to have a primary care physician who was a clear communicator, and 91% said it was important to have a primary care physician who shows emotion. Bornstein et al[20] also

found that patients find it of great importance to know what a primary care doctor's office looks like before choosing one. While unable to be accurately conveyed in a print biography, these pieces of information could easily be shown to patients through additional footage in an introductory video to help prospective patients find a doctor that matches up well with their wants and needs. Footage of the doctor interacting with a patient could actually show how a doctor treats patients, and what a patient could expect to experience in an encounter, versus just a text statement from the doctor summarizing his or her philosophy of care. The potential power of video was illustrated by Gerbert and colleagues.[21] In their study, participants' initial, primarily same-race selection of physicians significantly changed after viewing lengthier video segments of six physicians. The authors believe participants were more receptive to selecting a different-race doctor after viewing the videos because initially held stereotypes may have been disconfirmed by actually seeing these doctors display the same patient-centered qualities (eg, warm tone, friendly disposition) as other physicians of the participants' same race.[21]

Research Questions

While Perrault and Smreker[9] found that only a small percentage of biographies included a video of the physician, they surmise it might be possible that information not included in the biographies' text (eg, philosophies of care) would be more likely to be included in the videos. This led to the following research questions:

RQ1: What percentage of physician videos supply philosophies of care?

RQ2: What percentage of physician videos supply additional footage of the doctor's office or show the doctor interacting with a patient?

Besides just knowing professional information, patients also want to know personal information about a potential doctor. For example,

Engstrom and Madlon-Kay[5] found approximately 20% of their sample thought that knowing personal information about a doctor (ie, hobbies/interests, marital status, number of children, religion) was valuable in helping to choose a family physician. While these pieces of information were not found to be very prevalent within text biographies,[9] it would be easy for a physician to quickly note these pieces of information in a candid video interview. Therefore, the following research question was posed:

RQ3: What percentage of physician videos supply personal information?

Methods

Sampling Frame

The study performed by Perrault and Smreker[9] provided the sampling frame for the current study. The data from their analysis of more than 1,400 randomly selected family physician biographies (coded in March 2012) found 19 health systems, out of 152 US health systems sampled, to have videos of family medicine physicians included within their online biographies. The current researcher from November 2012–January 2013 went to those 19 health system web sites to search for biographies of family physicians with videos. Likely due to the ever-changing nature of web sites, of the 19 health systems Perrault and Smreker[9] found to have videos, the current researcher was only able to find 17 systems with videos. The researcher had previous knowledge of an additional three health systems containing physician videos, leading to the final number of 20 health systems in the United States used for this study. These regional health systems represented physicians practicing in 17 states and from a mix of both rural and urban settings. Of the 20 health systems identified with videos, 10 videos/biographies were selected from each system to code. Random selection of biographies with videos could not be performed because the majority of health systems did not allow for biographies with videos to be independently searched or filtered from their entire list of physicians. Therefore, the researcher had to click through every family physician on most health systems' websites just to find biographies with videos present. The first 10 biographies from a health system that were found to have a video present were coded. If a health system had fewer than 10 biographies with videos, all of the biographies for that system were coded. All data gathered for the current study are publicly accessible via the internet. Because neither physicians, nor their health systems, were being

Table 1: Frequencies of Coded Items in Text Biographies*

	Frequency of Presence	Percentage (%)
Gender		
Male	99	64.7
Female	54	35.3
Doctor type		
MD	116	75.8
DO	25	16.3
Not mentioned	12	7.8
Specialty		
Family medicine	153	100
Photo	151	98.7
Medical school	151	98.7
Address	150	98.0
Residency	142	92.8
Board certification	127	83.0
Hospital affiliations/privileges	76	49.7
Professional interests	69	45.1
Languages spoken	44	28.8
Year graduated	43	28.1
Accepting new patients	43	28.1
Philosophy of care	42	27.5
Hours available	36	23.5
Fellowship/internship	35	22.9
Personal hobbies/interests	28	18.3
Insurances accepted	22	14.4
Facebook recommendation	20	13.1
Years in practice	14	9.2
Where from/born?	14	9.2
Age	13	8.5
Professional Societies	12	7.8
Undergraduate school	11	7.2
Marital status	10	6.5
Number of children	10	6.5
Religion	5	3.3

* n=153

identified by name, approval for the study was waived by the researcher's institutional research review board.

Coding Scheme

The texts of the biographies were coded using a similar coding scheme of Perrault and Smreker.[9] Prior to formal coding of the videos, dozens of video biographies from multiple health systems were viewed, and categories were created, until the coding scheme appeared exhaustive. In total, 27 pieces of information were coded in the text biographies, and 23 pieces of information were coded in the videos (see Tables 1 and 2). The majority of the coding consisted of identifying the presence or absence of basic characteristics both in the text and in the videos present on the biographies (eg, is the doctor's board certification listed, are personal hobbies mentioned?). Prior to independent coding, 25 biographies (16.3%) were coded by the author and a trained research assistant, and intercoder agreement was calculated using Cohen's kappa. Kappa ranged from .781 to 1.0 for the 50 categories coded for each biography, with an overall percent agreement of 98.72%. Disagreements were then discussed and clarified between the coders, and perfect agreement on all 50 categories (kappa=1.0) was then obtained. The two coders then independently coded the remaining biographies.

Results

A total of 153 family physician biographies were coded from 20 different health systems across the United States. The median length of the videos present in the biographies was 97 seconds.

Research Question 1. A philosophy of care was coded as any statement that described how the doctor conceptualizes care with patients (eg, I believe in a patient-centered approach; I think it's important to listen to my patients). Doctors in 123 videos (80.4%) included a statement, or statements, describing their philosophies of care. For those who did not include a philosophy of care in the video, an additional six biographies (3.9%) included a philosophy of

Table 2: Frequencies of Coded Items in Videos*

	Frequency of Presence	%
Philosophy of care	123	80.4
Historical information/why medicine?/why like job?	115	75.2
Explains specialty	102	66.7
Music played in video	89	58.2
What consultation is like	69	45.1
Education	57	37.3
Why like being at clinic/area	54	35.3
Personal hobbies/interests	36	23.5
Professional interests	35	22.9
Number of children	31	20.3
Where from/born?	28	18.3
Other family members	28	18.3
Marital status	24	15.7
How patients describe you	17	11.1
Gives medical advice	13	8.5
Religion	13	8.5
Age	0	0
Languages spoken	0	0
Footage used		
Office shown	47	30.7
Doctor interacting with a patient	39	25.5
Interview questions posed on screen as text	25	16.3
Photos/footage of other personal artifacts	12	7.8
Photos/footage of hobbies	7	4.6

* n=153

care within the text of the biography. Twenty-four biographies (15.7%) did not include any philosophy of care, either in text or within the videos.

However, a strict philosophy of care statement would not be the only way a prospective patient could get to know how that doctor thinks about how care should proceed. Therefore, additional pieces of information were coded in the videos that could help patients reduce some uncertainty about a potential physician, to help them find a doctor who shares their same perspective on care. Doctors in 75.2% of videos discussed a historical piece of information (eg, why they got into medicine or why they like their job); 66.7% gave an explanation of their specialty (eg, what kinds of illnesses they treat or what a family physician does), and 45.1% explained some aspect of how a normal consultation would proceed (eg, questions the doctor will ask, how long a consultation lasts). Approximately 35.3% discussed why they liked either living in the area or working at the specific clinic, and 11.1% explained how a patient would describe them. Of these six pieces of information that could help a prospective patient understand a small part of the doctor's care philosophy, 146 videos (95.4%) included at least one of them.

Research Question 2. Unlike just a text biography that could only describe how a physician would act with a patient, video has the ability to actually show how a physician would consult with a patient. Video of the doctor interacting with a patient in his or her office would allow a prospective patient to see some of the nonverbal communicative aspects of the doctor (eg, does the doctor smile at the patient, sit close or far away from the patient, appear to listen?). Video can also show what a doctor's office looks like. The current study found that 30.7% of videos showed footage of the doctor in his or her office, and 25.5% showed footage of the doctor interacting with a patient. The remaining videos simply showed the doctor on camera in an interview style setting, with no supporting footage to complement the doctors' sound bites.

Research Question 3. Six pieces of information were coded in the videos that provided personal information and that could help a prospective patient understand a little more about the doctors outside of the medical context (ie, where the doctor is originally from, the doctor's marital status, the number of children the doctor has, other family members the doctor has, the doctor's religion/faith, and personal hobbies/interests of the doctor). Approximately 48% included at least one of these pieces of personal information. The complete breakdown of all of the pieces of information coded in both the text and the videos on the biographies can be found in Tables 1 and 2.

Discussion

The only previous study of its kind dedicated to determining the kinds of information available to prospective patients about family physicians through their health system biographies found they were lacking many of the pieces of information patients have stated they find important when deciding on a doctor to initially visit.[9] The current research expanded upon that study to determine if biographies that included videos of the physicians would offer patients more information that could help them make an informed choice. Indeed, unlike information only found within the text of biographies, the majority of video biographies gave prospective patients some kind of information helping them to understand the kind of care they might receive from a potential doctor. Additionally, hearing in the videos how the physicians actually speak (eg, do they have an accent that is difficult to understand, do they speak slowly) patients can begin to more fully understand the physicians' interpersonal skills and more comprehensively determine which doctor they believe would be the best fit for themselves.

However, there is clearly work to be done for health systems in both creating videos of their doctors and placing them on their web sites. For nearly half of the health systems' web sites visited in this study (n=9), it was not easy to determine which family physicians' biographies included videos. Health systems should help patients clearly find which biographies include videos and possibly even include it as a search function, much like many systems allow patients to search only for male/female physicians or for physicians within a certain geographic radius. Many of the health systems that made it easy to find doctors with videos included an icon of a camera next to the physicians' names or the terms "video included."

The kind of information present in the videos was also widely variable across health systems. Some videos were less than 30 seconds and could barely provide any additional information beyond that provided by the text portion of their biographies. Surprisingly, nearly 70% of videos did not show any additional footage of the doctor's office. Also, nearly 75% of videos did not show footage of the doctor interacting with a patient. Without these additional pieces of footage, the full potential of this visual medium is not being utilized.

Limitations

A major limitation of this study stems from the fact that there is no comprehensive list of all the physician video biographies that exist online or a list of systems that provide introductory videos of their physicians. As a result, there was no way to randomly select physician biographical videos from this theoretical population of videos. Therefore, the videos analyzed might not necessarily be representative of all physician videos on the internet. Until a national repository, or database, of physician video biographies is created it may never be possible to truly randomly select biographies and videos from all health systems to analyze. Hopefully, as more health

systems begin to produce video biographies of their physicians, these videos will be easier to find and catalog, not only for patients to access, but also for researchers to analyze. Despite this limitation, the findings from this study can still be helpful for systems or physicians looking to create video biographies as they can learn from others' videos and find ways to improve upon their own.

Future Directions and Conclusions

Future research needs to be performed to clearly determine what prospective patients would like to see, hear, or learn from physicians' introductory videos and text biographies. In addition, studies should be performed to determine what the ideal length of an introductory video should be. Research should also be performed that experimentally manipulates different pieces of information found in biographies to determine if apprehension toward seeking medical care can be reduced. For example, would a more information-rich biography help prospective patients feel like they are making a better decision and ultimately lead to more satisfaction with their medical care or even lead to improved patient-physician communication in their future consultations?

The addition of videos to doctors' online biographies has the potential to revolutionize the way patients find their future physicians. In the past, patients would have to actually visit in person with numerous doctors before finding one they would like to continue visiting. With the advent of online videos a prospective patient can view dozens of videos of potential doctors and get to know them as both physicians and fellow human beings without wasting any physician's time or resources.

Additionally, for patients who are apprehensive about visiting a physician in the first place, offering them more information to help them find the "right" doctor from the comforts of their own homes, might encourage them to come in for preventative care, which is a key to reducing overall health care costs. If patients are less apprehensive in the actual consultations because they know what to expect from the doctor, the patients will likely be more easily able to communicate their maladies to the physician, which should help the doctor more easily come to accurate diagnoses.[22] As health care costs continue to rise, finding the right doctor is becoming more important than ever.

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