

GUIDELINES FOR MEDICAL ADVERTISEMENT CONTENT ON SOCIAL MEDIA



Health Policies and Standards Department
Health Regulation Sector (2019)

INTRODUCTION

Health Regulation Sector (HRS) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (6) Of 2018, to undertake several functions including, but not limited to the following:

- Developing regulation, policy, standards, guidelines to improve quality and patient safety and promote the growth and development of the health sector
- Licensure and inspection of health facilities as well as healthcare professionals and ensuring compliance to best practice
- Managing patient complaints and assuring patient and physician rights are upheld
- Managing health advertisement and marketing of healthcare products
- Governing the use of narcotics, controlled and semi-controlled medications
- Strengthening health tourism and assuring ongoing growth
- Assuring management of health informatics, e-health and promoting innovation

The Guidelines for Medical Advertisement Content on Social Media aims to fulfil the following overarching DHA Strategic Objectives and Program within the Dubai Health Strategy (2016–2021):

- Objective 1: Position Dubai as a global medical destination by introducing a value-based, comprehensive, integrated and high-quality service delivery system
- Objective 2: Direct resources to ensure happy, healthy and safe environment for Dubai population
- Strategic Program 10: Excellence & Quality, which promotes excellence in healthcare service delivery in Dubai while enhancing patient happiness, experience, satisfaction and trust

ACKNOWLEDGMENT

The Health Policy and Standards Department (HPSD) developed this document in collaboration with Subject Matter Experts. HRS would like to acknowledge and thank these professionals for their dedication toward improving quality and safety of healthcare services.

Health Regulation Sector

Dubai Health Authority

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EXECUTIVE SUMMARY

DHA recognises the value and demand of Social Media Advertisements (SMAs) in the field of healthcare. This guideline sets out the requirements for managing medical advertisement content on social media DHA licensed to health facilities and healthcare professionals. Any information provided on social media for a regulated health service should be reliable and useful and assist patients, carers and public in their decision-making. The risk of false, misleading or deceptive SMA can lead to unsafe (physical and psychological), unnecessary and unethical practice. All health facilities and healthcare professionals are therefore required to promote good ethical SMA to ensure the health profession provides high quality and safe care and remains a trusted entity, source of best practice and information for patient informed and decision-making.

This guideline is not exhaustive and therefore other matters that relate to health advertisement that are not covered in this guideline. Furthermore, this guideline does not detail specific scenarios, but rather sets out the parameters of good SMA practice. All DHA licensed health facilities and healthcare professionals alike should make use of the guideline within the context of their own healthcare setting and assure ethical practice. If there is any conflict between this Guideline, Policy and/or Law, then the Law will take precedence followed by the Policy. The guideline touches on the following:

- General Considerations;
- Health Facility Management Personnel Responsibilities;
- Healthcare Professionals Responsibilities; and
- Use Of Pictures/Images and Videos (PIV).

DEFINITIONS

Authorities: The Regulatory Authorities within the United Arab Emirates according to the geographical jurisdiction, Ministry of Health and Prevention, Department of Health - Abu Dhabi, Dubai Healthcare City Regulatory Authority and Dubai Health Authority.

De-identified data: is a computing standard in which sensitive medical information contained in Electronic Health Records (EHR) is de-identified so that unauthorized users are unable to read the actual content since it is no longer in its original state.

E-mail Or Electronic mail: is commonly called e-mail or email, is a method of exchanging digital messages from an author to one or more recipients. Modern e-mail operates across the Internet or other computer networks.

Health Facility Management Personnel: Includes The CEO, The Executive Board, Medical/Clinical Director, Service Managers Responsible for day to day operations and Facility Management.

Health Facility: Any place prepared to examine medically the patients or to help them in the diagnosis of their diseases or to treat or nurse or host them for convalescence or to do any action related to treatment or rehabilitation after treatment whether its owner or Manager is an individual or an Organization.

Healthcare Professional: A person who by education, training, certification and licensure is qualified to provide healthcare services.

Inspection: DHA authorized individuals for determining compliance with applicable laws and regulations.

License: A permission granted by DHA to the HF to provide healthcare services within the Emirate of Dubai under the jurisdiction of DHA.

Patient: is any individual who receives medical attention, care or treatment by a DHA licensed healthcare professional in a DHA licensed health facility.

Social Media Advertisement (SMA): is any information about the Health Product, Service, Facility, Professional, Treatment or Therapy through the means of social media.

Social Media: is the collective of online communications platforms dedicated to community-based input, interaction, content sharing and collaboration or networking. It includes websites and applications dedicated to forums, microblogging, social networking, social bookmarking, social curation, to share opinions, information, experiences, images, and video or audio clips and includes websites and applications used for social networking. This includes but is not limited to Facebook, Instagram, Twitter, Reddit, Pinterest, Flickr, WhatsApp, YouTube, Snapchat and LinkedIn.

ABBREVIATIONS

DHA	:	Dubai Health Authority
GA	:	General Anaesthesia
HPSD	:	Health Policies and Standards Department
HRS	:	Health Regulation Sector
PIV	:	Pictures, Images and Videos
SMA	:	Social Media Advertisement
UAE	:	United Arab Emirates

1. BACKGROUND

Social media platforms are web based communication tools that enable people to interact with each other by sharing and consuming information. They allow health facilities and healthcare professionals to interact with patients and get them involved in their own healthcare, and are used to easily communicate important messages or provide information to patients or consumers about new evolving practices and/or services. Social Media is the new tool to attract new patients and followers.

The various types of social media platforms used may include, but is not limited to the following:

- Social networking (Facebook, LinkedIn, Google, WhatsApp);
- Microblogging (Twitter, Tumblr);
- Photo sharing (Instagram, Snapchat, Pinterest); and
- Video Sharing (YouTube, Facebook Live, Periscope, Vimeo).

The emergence of these social media platforms and technologies has led to significant changes in the way patients' access health information. While this has aided healthcare marketing, it has also lead to unethical practices and hence requires to be regulated. Monitoring and auditing Medical Content of Social Media Advertisements (SMAs) is a proactive and preventative measure to safeguard and prevent misleading, unethical and unnecessary selling of healthcare services. Additionally, it ensures that patients and the public are given a balanced viewpoint, for informed decision-making. In this context, the Health Regulation Sector (HRS) has developed Guidelines for Medical Advertisement Content on Social Media in an effort to maximize compliance and adopt good ethical medical practice. All Dubai Health Authority (DHA) licensed health facilities and healthcare professionals are encouraged to follow the guidelines within the context of their own healthcare setting.

2. PURPOSE

- 2.1. To promote the adoption of current international best practice for managing medical advertisements on social media by DHA licensed health facilities and healthcare professionals.
- 2.2. To protect and prevent patients and the public from incorrect, ambiguous, misleading as well as unethical medical advertisements on social media and associated harm.

3. SCOPE

- 3.1. Guidance on medical advertisement on social media to DHA licensed health facilities and healthcare professionals.

4. APPLICABILITY

- 4.1. All DHA licensed health facilities and healthcare professionals engaged in SMAs.

5. RECOMMENDATION ONE: SOCIAL MEDIA ACCOUNTS

- 5.1. All SMAs related to healthcare services should be aligned and comply with United Arab Emirates (UAE) Federal and local laws and regulations.
- 5.2. Healthcare professionals, influencers and or health facility administrative staff, promoting any activity, healthcare service or outcomes specifying the health facility name and/or location should ensure the Medical Director (MD) of the health facility approves the SMA content.
- 5.3. It is the responsibility of the MD to notify all staff (new and/or existing) that all SMAs that use the health facility name and/or location have to be approved by him/her.
- 5.4. The MD is the responsible individual for all content advertised related to the health facility or healthcare professionals.

5.5. The healthcare professional promoting only their service (without using the health facility name and/or location) are responsible and accountable for all SMA content on their professional account.

6. RECOMMENDATION TWO: GENERAL CONSIDERATIONS

6.1. DHA licensed health facilities and healthcare professionals should consider the ethical and legal implications of SMA, as patients/consumers might not be in position to judge the merits of the published healthcare service(s) or product(s).

6.2. Healthcare professionals who are engaged in SMA should be competent through education, training and experience to provide the service advertised and act in a manner of professional capacity, integrity and authenticity as advertised.

6.3. All SMA must be substantiated, especially when it relates to the outcome(s) of treatment, whether implied or explicitly stated and should always include the associated risks.

6.4. Health facilities and healthcare professionals receiving financial or other material benefit for promoting healthcare, or non-healthcare, related products or services should have a transparent relationship with the relevant organisation (or individual) and this should be documented and disclosed to their patients.

6.5. Health facilities and/or healthcare professionals are accountable for the content and style of SMAs.

6.6. Health facilities and/or healthcare professionals should avoid promoting:

6.6.1. Non-therapeutic products

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- 6.6.2. Products and services not directly related to healthcare
 - 6.6.3. Products and services that are not proven to be healthy or sound
 - 6.6.4. Products that are not supported by clinical evidence
 - 6.6.5. Products that affect health adversely.
- 6.7. Health facilities and/or healthcare professionals may:
- 6.7.1. Promote public health information as part of a public health campaign or public health activities.
 - 6.7.2. Raise public awareness of particular products and services through public health.
- 6.8. There should be documented consent from any individual or patient used in any form of SMAs.
- 6.8.1. The SMA consent should be limited for the subject for which the consent was requested and should not exceed the period by which consent was granted.
- 6.9. Absolute statements, exaggerated claims and alarming expressions such as, but not limited to; unique, one of a kind, the best, exclusive, safest, the only, incomparable, unprecedented, best product, magic, miraculous, assured success, very limited quantity, has no side effects, get money back, 100%, absolutely certain, distinguished, famous, pioneer and immediate results should not be used.
- 6.10. The use of negative statement(s) against healthcare professional, health facility or government entity is not acceptable.

7. RECOMMENDATION THREE: HEALTH FACILITY MANAGEMENT RESPONSIBILITIES

- 7.1. The management personnel of the DHA licensed health facility should ensure the following:
- 7.1.1. All SMAs should be aligned with UAE federal and local laws and local regulations.
 - 7.1.2. All healthcare professionals should maintain a separate professional and personal social media account and avoid interacting with current or past patients on personal social media accounts.
 - 7.1.3. The content provided on the SMAs should be factually accurate, reliable and substantiated and contains all risks and benefits; advantages and disadvantages of services provided.
 - 7.1.4. The content and language used in the SMAs should be professional and culturally sensitive and acceptable.
 - 7.1.5. The content of SMAs should not exploit the trust of consumers and fine print statements are placed in a prominent location, legible to the unaided eye or target view.
 - 7.1.6. Assure protection of patient health information on social media platforms.
 - 7.1.7. Avoid social media discussions with patients who may disclose their health information.
 - 7.1.8. Nominate a person(s) trained and experienced to moderate the content of social media accounts for the health facility and its health professional and implement controls and recommendations where required.

- 7.1.9. Train all staff on acceptable social media use as part of their induction training and conduct refresher-training sessions at regular intervals.
- 7.1.10. Have in place clear social media policies and ensure all employees are aware of their responsibilities. These should be reviewed and updated on a regular basis.
- 7.1.11. Communicate the potential penalties for social media violations with all employees.
- 7.1.12. SMAs and/or posts should be archived with edits and formats for verification and audit purposes. From time to time HRS may conduct SMA audit as per **Appendix 1 and 2**.
- 7.1.13. Take necessary steps for social media accounts to be included in the organization's risk assessments.
- 7.1.14. Ensure appropriate access controls are in place to prevent unauthorized use of the health facility and health professional social media account.
- 7.1.15. The health facility or healthcare professional shall not use the DHA or any other government or public authority logo for SMA unless explicit written approval has been acquired.

8. RECOMMENDATION FOUR: HEALTHCARE PROFESSIONALS RESPONSIBILITIES

8.1. DHA licensed healthcare professionals using social media platforms should observe the following:

- 8.1.1. Use separate personal and professional accounts.

- 8.1.2. Clearly state name, title, professional qualification and speciality as per their DHA license.
- 8.1.3. Provide information that is truthful, accurate, concise, up-to-date and easy to understand.
- 8.1.4. Provide information that is supported by current international best practice in medicine, peer-reviewed literature, originated from recognized bodies of scientific and clinical knowledge and conform to minimal standards of care.
- 8.1.5. Provide information that clearly indicates if the information provided is based upon scientific studies, expert consensus, professional experience or personal opinion.
- 8.1.6. Disclose clearly any information (e.g., financial, professional or personal) that could influence patients' understanding or use of the information, products or services offered on any social media platforms offering healthcare services or information.
- 8.1.7. Ensure social media account are used to discuss latest treatment and therapies and medical news are safe and secure.
- 8.1.8. Avoid claiming one's own services or products are superior to those provided by another physician, health professional or health facility.
- 8.1.9. Protect patient privacy and confidentiality at all times, especially on social media.
- 8.1.10. Prevent unauthorized access to patient's personal data, including pictures and its use to assure that de-identified data cannot be linked back to the user or patient.
- 8.1.11. Obtain informed consent from a patient to disclose their health-related information.

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- a. Obtain verifiable consent from the child's parent before collecting, using, or disclosing personal or health information of a child below the age of eighteen (18) years.
- 8.1.12. Avoid identification of patients.
- 8.1.13. Ensure that SMAs shall not exceed their intended purpose.
- 8.1.14. Avoid providing information that is misleading or deceptive.
- 8.1.15. Avoid inducing fear or concern in patients regarding their own health in order to increase demand for a product, procedure or service.
- 8.1.16. Avoid creating an unnecessary need of a product, procedure or service.
- 8.1.17. Avoid exploiting patients' vulnerability or lack of health or health-related knowledge.
- 8.1.18. Abide by and align with the DHA requirements for the Code of Conduct for Healthcare Professionals.
- 8.1.19. Avoid inappropriate and unprofessional behaviour online.
- a. Maintain professionalism online as one would during a face-to-face consultation.
- 8.1.20. Avoid cyber-bullying towards any individual.
- 8.1.21. Report any unprofessional behaviour on social media to the health facility management or competent authority.
- 8.1.22. Refer to the health facility's policy on social media for direction on the proper use of SMA.

9. RECOMMENDATION FIVE: USE OF PICTURES, IMAGES AND VIDEOS

- 9.1. Written consent should be obtained and documented from any individual or patient whose Pictures, Images and Videos (PIV) and statements are used in SMA(s).
- 9.2. The written consent should be aligned with the DHA Guidelines for Patient Consent and Managing Health Records.
- 9.3. The MD should ensure that PIV encouraging unhealthy, risky behaviours and habits are not approved.
- 9.4. PIV and language used in SMA in the UAE should abide by the following:
 - 9.4.1. Not breach the UAE culture and Islamic teachings
 - 9.4.2. Not contradict UAE common interest and policies
 - 9.4.3. Not use sovereignty symbols of the UAE without prior approval from the competent authority
 - 9.4.4. Not breach health ethics
 - 9.4.5. Not display intimacy or sex appeal
 - 9.4.6. Avoid unhealthy, risky behaviours and habits
 - 9.4.7. Be related to the healthcare service promoted.
- 9.5. PIV of government officials may be accepted for a press release or inauguration ceremony upon their approval.
- 9.6. Before and after PIV should be of the same individual, using the same lens, with no photo shop enhancements or equivalent software and should include the following statement, “there is no

guarantee that the result will be the same, as it might vary from one individual to another” and the risks. This should be written in the same font size as the rest of the SMA.

- 9.7. There shall be no video filming or live streaming for SMA while the patient is undergoing surgery or induced under General Anaesthesia (GA) in any DHA licensed health facility for promotion of the health facility or healthcare professional.

REFERENCES

1. Australian Health Healthcare professional Regulation Agency (2014). Guidelines for Advertising Regulated Health Services. For advertisers including registered health healthcare professional. Available on : <http://apps.who.int/medicinedocs/documents/s17806en/s17806en.pdf> (accessed 30/07/2019).
2. Australian Medical Association (2019). Ethical guidelines for doctors who advertise or endorse products and services. Available on : <https://ama.com.au/media/ethical-guidelines-doctors-who-advertise-or-endorse-products-and-services> (accessed 30/07/2019).
3. Cabinet Decision No. (21) of 2018, Concerning the regulation on marketing relevant feeding products for infants and young children Available on : https://www.dha.gov.ae/Asset%20Library/MarketingAssets/20180611/20180625/CD21_2018.pdf (accessed 16/04/2019).
4. Denecke K (2015). Ethical Issues of Social Media Usage in Healthcare. U.S. National Library of Medicine, 10(1), 137–147. Available on : <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4587037/> (accessed 23/04/2019).
5. Federal Law No. (6) Of 2018, Concerning the Establishment of Dubai Health Authority.
6. Federal Law No. (2) Of 2019, Concerning the use of ICT in health fields.
7. Federal Law No. (7) Of 1975, Concerning Practice of Human Medicine Profession.
8. Health Board of Australia (2014). Guidelines for advertising of regulated health services. Health Board of Australia, Available on : <http://www.ahpra.gov.au/Publications/Advertising-resources/Legislation-guidelines/Advertising-guidelines.aspx> (accessed 08/05/2019).

9. Health Sciences Authority (2016). Explanatory Guidance to the health products (advertisement of therapeutic products) Regulation 2016. Available on :
https://www.hsa.gov.sg/content/dam/HSA/HPRG/Medical_Advertisements_Sales_Promotion/Guidelines%20on%20Medical%20Advertisements/TP%20Advert%20guidance_1Aug17.pdf
(accessed 05/05/2019).
10. HIPAA Journal (2019). HIPAA Social Media Rules. Available on :
<https://www.hipaajournal.com/hipaa-social-media/> (accessed 05/05/2019).
11. Lachman V (2013). Social Media: Managing the Ethical Issues. American Nurses Association.
Available on :
<http://www.nursingworld.org/MainMenuCategories/EthicsStandards/Resources/Social-Media-Ethical-Issues.pdf> (accessed 06/05/19).
12. Ministry of Health and Prevention (2017). Ministerial decision no. (430) of 2007 regarding Medical Advertisement Regulation. Available on :
<https://www.mohap.gov.ae/en/MediaCenter/News/Pages/1940.aspx> (accessed 29/07/19).
13. National Media Council (2019). Electronic Media System. Available on :
<http://online.fliphtml5.com/ntcly/udxo/#p=6> (accessed 06/05/19).
14. Smailhodzic E. (2016). Social media use in healthcare: A systematic review of effects on patients and on their relationship with healthcare professionals. Researchgate 1, 1-14. Available on :
https://www.researchgate.net/publication/306929264_Social_media_use_in_healthcare_A_systematic_review_of_effects_on_patients_and_on_their_relationship_with_healthcare_professionals
(accessed 07/05/19).

15. Special Committee on Ethics and Professionalism (2012). Model Guidelines for the Appropriate Use of Social Media and Social Networking in Medical Practice. Federation for State Medical Boards, 1, 1-15. Available on : <https://www.fsmb.org/siteassets/advocacy/policies/model-guidelines-for-the-appropriate-use-of-social-media-and-social-networking.pdf> (accessed 08/05/19).
16. Stec C (2018). Social Media Definitions: The Ultimate Glossary of Terms You Should Know. Available on : <http://blog.hubspot.com/blog/tabid/6307/bid/6126/The-Ultimate-Glossary-101-Social-Media-Marketing-Terms-Explained.aspx> (accessed 30/07/2019).
17. United States Department of Health and Human Services (2013). Summary of the HIPAA Privacy Rule. Available on : <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html> (accessed 09/05/19).
18. Vanderbilt University Medical Center (2019). VUMC Social Media Policy. Available on : <https://ww2.mc.vanderbilt.edu/socialmediatoolkit/26923> (accessed 09/05/19).

APPENDICES

APPENDIX 1: ACCEPTABLE AND NOT ACCEPTABLE SOCIAL MEDIA ADVERTISEMENT

ACCEPTABLE	NOT ACCEPTABLE
<p>a. A factual and clear statement of the service(s) and/or any product(s) offered.</p> <p>b. Contact details of the office of the health professional, including email or website addresses, and telephone numbers</p> <p>c. The gender of healthcare professionals.</p> <p>d. A statement of office hours regularly Maintained by the healthcare professional and the availability of after-hours services.</p> <p>e. For any surgical and/or invasive procedures, the appropriate warning statement in a clearly visible position.</p> <p>f. Non-enhanced photos or drawings of the healthcare professional or his or her office.</p> <p>g. A statement of any language(s) other than English fluently spoken by the healthcare professional or another person in his or her office.</p> <p>h. A statement about fees charged, bulk-billing arrangements, or other insurance plan arrangements and instalment fee plans regularly accepted.</p> <p>i. A statement of the names of schools and training programs from which the healthcare professional has graduated and the qualifications received.</p>	<p>a. Create or be likely to create unwarranted and unrealistic expectations about the effectiveness of the health services advertised</p> <p>b. Encourage (directly or indirectly) inappropriate, indiscriminate, unnecessary or excessive use of health services; for example, references to a person improving their physical appearance and the use of phrases such as ‘don’t delay’, ‘achieve the look you want’ and ‘looking better and feeling more confident’ with the potential to create unrealistic expectations about the effectiveness of certain services.</p> <p>c. Mislead, either directly, or by implication, use of emphasis, comparison, contrast or omission</p> <p>d. Use testimonials or unconfirmed testimonials comparing different regulated health Professions.</p> <p>e. Claim that the services provided by a particular regulated health profession are better, as safe as or safer than others.</p> <p>f. Refer to the recovery time following provision of a regulated health service that may lead to unrealistic expectations.</p> <p>g. Lead to, or be likely to lead to, inappropriate self-diagnosis or self-treatment</p>

<p>j. 'Advertising of qualifications and titles' as recognised by DHA.</p> <p>k. Reference to any healthcare professionals who hold specialist registration or endorsement under DHA License.</p> <p>l. A statement of the teaching positions currently or formerly held by the healthcare professional in board-approved or accredited institutions, together with relevant dates.</p> <p>m. A statement of the accreditation or certification of the healthcare professional with a public board or agency, including any affiliations with hospitals or clinics.</p> <p>n. A statement of safety and quality accreditation of the practice or health care setting.</p> <p>o. A list of the healthcare professional's peer-reviewed publications.</p> <p>p. A statement providing public health information encouraging preventative or corrective care (public health information should also be evidence based wherever possible).</p>	<p>h. Abuse the trust or exploit a lack of knowledge by patients or clients.</p> <p>i. Failure to disclose health risks associated with a treatment.</p> <p>j. Omit the necessary warning statement for surgical or invasive procedures</p> <p>k. Contain language that could cause undue fear or distress.</p> <p>l. Contain any information or Material that is likely to make a person believe his or her health or wellbeing may suffer from not taking or undertaking the health service.</p> <p>m. Contain price information that is inaccurate, or fails to specify any conditions or variables to an advertised price or offers time-limited discounts or inducements that cannot be met.</p> <p>n. Contain any claim, statement or implication that:</p> <p>i. Either expressly, or by omission, that the treatment is infallible, unfailing, Magical, miraculous or a certain, guaranteed or sure cure.</p> <p>ii. A healthcare professional has an exclusive or unique skill or remedy, or that a product is 'exclusive' or contains a 'secret ingredient'</p> <p>iii. A healthcare professional provides superior services to those provided by other registered health healthcare professionals.</p>
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- iv. The results of the health service offered are always effective.
- v. The services can be a substitute for public health vaccination or immunisation.
- o. Failure to inform the public fully of the risks of undertaking a health procedure or to replace the process of informed consent.
- p. Provide a patient or client with an unsolicited appointment time that has not been requested by the patient or client.
- q. Promote tobacco products, smoking, alcohol, or any other addictive substances or products that are known to affect health adversely.
- r. Be vulgar, abusive, sensational, contrary to accepted standards of propriety or likely to bring a health profession into disrepute.
- s. Invasive or non-invasive procedures that exclude a clear statement on the associated risks.

APPENDIX 2: PROHIBITED SOCIAL MEDIA CONTENT OF MEDICAL ADVERTISEMENTS

No.	LIST OF PROHIBITED SMAs
1.	Products scientifically proven harmful to public health.
2.	Tattooing, profanity and nudity.
3.	Treatments that guarantee full recovery.
4.	Trial usage of medical products or services.
5.	Commercially harms other healthcare facilities or professionals.
6.	Patient identifiable information/details.
7.	Unrealistic, absolute, unwarranted, or include false statements on the effectiveness of the advertised treatment/service, health device or medicine.
8.	Patient testimonials without written patient consent.
9.	Comparisons with other treatment/service, health device or medicine, unless it is scientifically proven (peer-review) and supported by credible references.
10.	Words that can cause fear, anxiety, panic or distress to patients or the public or cause them to believe that they suffer from serious, harmful or infectious disease.
11.	Terms that are invalidated to include Health Professional providing the service i.e. exclusive unique skill, and/or the results are always effective.
12.	Visual images of 'before' and 'after' that do not include a disclaimer that the outcome of the treatment/service, health device or medicine may vary from one patient to another. Visual images must only represent patients who have received the treatment/service health device or medicine.
13.	Abuse and unfounded claims against health professionals, health facilities or government entities.
14.	All forms of video filming for health advertisement while the patient is undergoing surgery under general anaesthesia for promotion of the health facility, physician or healthcare professional online or via social media platforms is prohibited for the purposes of marketing the Health Facility, Physician, Dentist, Nurse or Allied Healthcare Professional.