

Having Social Media among Integrated Plastic Surgery Applicants: Is It Needed to Match?

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Background: Little information exists on the perceptions of integrated plastic and reconstructive surgery (PRS) residency applicants on the need for having social media (SoMe) during the application process.

Methods: A cross-sectional survey study was conducted during the 2022 match cycle to assess integrated PRS residency applicants' perceptions on the role of SoMe during the match. Univariate and multivariate analyses were performed on variables of interest. Qualitative analysis was conducted on free-form responses.

Results: Seventy-nine surveys were completed (response rate: 24%). The majority of respondents were educated in the United States (92%). Instagram was the most commonly used SoMe platform (92%). Of those surveyed, 18% thought that SoMe was beneficial to the application process. Twenty-nine percent of respondents agreed that a SoMe presence increases one's chances of matching into PRS residency (41% disagreed and 30% responded neutrally). Forty-four percent endorsed stress about maintaining a SoMe presence in PRS. Having mentors who recommended maintaining a SoMe presence was associated with the belief that SoMe increases one's chances of matching [odds ratio (OR) 8.1, 95% confidence interval (CI) 1.1–40.4, $P = 0.011$] and stress about maintaining a SoMe presence (OR 6.3, 95% CI 1.2–33.3, $P = 0.030$). Applicants who did research years had lower odds of experiencing stress (OR 0.16, 95% CI 0.04–0.70, $P = 0.015$).

Conclusions: The growing role of SoMe in the residency selection process may be exacerbating applicants' stress and anxiety. PRS programs may consider establishing clear policies for how SoMe will be used in evaluating candidates. (*Plast Reconstr Surg Glob Open* 2023; 11:e5394; doi: [10.1097/GOX.0000000000005394](https://doi.org/10.1097/GOX.0000000000005394); Published online 27 November 2023.)

INTRODUCTION

Social media (SoMe) use has increased drastically over the last two decades, a trend that has also affected the medical profession.^{1,2} It has played an especially important role in plastic and reconstructive surgery (PRS), with many plastic surgeons relying on SoMe for their marketing and outreach.^{3–8} Medical students, for

their part, frequently turn to SoMe to share their experiences, connect with colleagues, and learn about residency programs. Thus, SoMe has become not just a setting for informal dialog, but a place to establish professional profiles. In fact, one study found that 93% of PRS residency programs had an active Instagram account.⁹

SoMe has played a growing role in the residency match process, a trend accelerated by the COVID-19 pandemic.¹⁰ Although SoMe is not a required component of the match process, the unofficial role it plays is crucial. It has become an important way for applicants to learn about programs and connect with current residents, and it has also become a potential way for programs to glean information about applicants. Indeed, in a survey of applicants to PRS, 20% responded that a residency's SoMe profile influenced

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how they ranked that program in the match.¹¹ In a similar survey of applicants, 60% of respondents reported that a program's SoMe presence influenced their perception of the program.¹² However, without policies or norms guiding the use of SoMe during the match, its introduction to an already competitive process could be anxiety-provoking for applicants, especially since previous studies have found that SoMe use is associated with poor mental health among students.^{13–15}

As the specialty with the lowest match rate in 2020,^{15–17} the PRS match is particularly prone to these anxieties. It is therefore imperative to understand the perceptions of PRS applicants on the growing role of SoMe during the match to implement policies that promote the beneficial information-sharing aspects of SoMe while minimizing the anxieties it can provoke. However, little information currently exists on the views of PRS applicants regarding the role of SoMe in the application process and the match. In this study, we surveyed PRS applicants' opinions on having SoMe use during the residency application process. We hypothesized that those who posted more frequently on SoMe were more likely to believe that doing so would increase one's chances of matching and more likely to experience stress about maintaining a SoMe presence.

METHODS

Study Design and Settings

This is an institutional review board–approved cross-sectional survey study. An anonymous survey was created using Research Electronic Data Capture (REDCap; Vanderbilt University, Nashville, Tenn.). The survey was distributed between March and April 2022 via e-mail to all integrated PRS applicants to Beth Israel Deaconess Medical Center during the 2022 cycle. Two e-mail reminders were sent during this period.

The survey items were developed by collating interests among attendings and residents in our department. The survey was pretested among our research staff to ensure clear and concise questions. Five sections were included in the survey: sociodemographic characteristics, general SoMe habits, engagement with PRS on SoMe, views of the role of SoMe in the residency application process, and general qualitative feedback (See survey, Supplemental Digital Content 1, which displays the survey supplied to the applicants, <http://links.lww.com/PRSGO/C853>).

The primary aim was to describe integrated PRS applicants' perceptions of SoMe as a part of the residency application process. We specifically sought to identify potential factors associated with a belief that SoMe increased the chances of matching into a PRS residency, and factors associated with stress or anxiety about maintaining a SoMe presence in PRS. Finally, we categorized and described prominent themes from the qualitative feedback section of the survey.

Statistical Analysis

To investigate the possible presence of nonresponse and sampling bias, we compared various characteristics of our sample with direct information about the national

Takeaways

Question: What are the views of applicants to integrated plastic surgery residencies on social media (SoMe) use during the match?

Findings: Comparing SoMe with other applicants was associated with greater self-reported stress. Applicants who posted more frequently on SoMe were not more likely to believe that SoMe conferred an advantage for matching; instead, they were more likely to believe that it played a beneficial role in the application process.

Meaning: Those who view SoMe as a “means to an end” during the application process, rather than as a beneficial resource, are more likely to be stressed by the increasing emphasis on SoMe.

applicant pool from the American Association of Medical Colleges^{18,19} and data from previous surveys of applicants nationally.^{20,21}

Chi-square tests were used to determine differences between the categorical variables. Multivariable logistic regression models were constructed to evaluate factors associated with the belief that SoMe increased one's chances of matching into PRS and feelings of stress about maintaining a SoMe presence in PRS. A thematic analysis was conducted for the free-form responses using inductive and deductive coding, analytic categorization and theme development.

RESULTS

Applicants Characteristics

Of 324 surveys distributed, 79 were completed (response rate: 24%). Table 1 summarizes the characteristics of this cohort. The median age was 27 years (interquartile range 3). Forty-four respondents identified as women, 34 as men, and one chose not to respond. Seventy-three applicants attended medical school in the United States (Table 1). Twenty-six respondents completed at least one research year during medical school or after school before applying to PRS residency.

Nonresponse Bias Analysis

In an analysis of potential nonresponse and sampling bias, we found that our response sample well-approximated the national applicant pool in terms of gender distribution and was consistent with prior survey studies with regards to research year experience and the geographic distribution of applicants (Table 2). However, our sample contained a significantly smaller fraction of international medical graduates than the national applicant pool.

General SoMe Preferences and Behavior

Instagram and Facebook were the most used platforms in 92% and 73% of the cases, respectively (Fig. 1). Ninety-eight percent of the applicants reported using SoMe at least once weekly. Most applicants posted once a month (25%) (Fig. 2). Forty-three percent and 36%

Table 1. Sociodemographic Characteristics, Medical Education, and Research Background

Characteristics	n (%)
Total applicants surveyed	79
Age median (IQR)	27 (3)
Gender, n (%)	
Female	44 (56)
Male	34 (43)
Preferred not to answer	4 (1)
Region, n (%)	
Northeast	25 (32)
South	21 (27)
Midwest	24 (30)
West	7 (9)
Pacific	1 (1)
Outside the United States	1 (1)
Trained in a US medical school	73 (92)
Current position	
Medical student	70 (89)
Graduated from medical school and doing research	4 (5)
Graduated from medical school and doing residency	5 (6)
Took research year(s) in medical school or after school before applying into plastic surgery residency	26 (33)

IQR, interquartile range; n, frequency.

of respondents used SoMe most commonly to connect with friends and family and for entertainment, respectively. The least common reason for using SoMe was for academic and professional networking purposes (Fig. 3). Seventy-eight percent of respondents set up private accounts on Instagram (Fig. 4).

SoMe Preferences and Behavior Related to PRS

Ninety-two percent of applicants followed PRS-related SoMe accounts, and 38% of applicants posted PRS-related content on their own accounts. Thirty-two percent of applicants had a SoMe account strictly dedicated to their professional career or their applicant profile. Of those, 72% used Instagram for their professional account. Instagram (92%) was the most frequent platform used to follow PRS-related content. More than half of the applicants never (59%) reported posting PRS-related content on SoMe. Thirty-five percent reported posting PRS-related content on Instagram (Fig. 5). Fourteen (18%) respondents had an advisor recommend that they have a SoMe presence in plastic surgery.

In terms of opinions on SoMe, 29% of respondents agreed or strongly agreed that having a SoMe presence increased one’s chances of matching into PRS, 30% responded neutrally, and 41% disagreed or strongly disagreed (Table 3). Meanwhile, 18% of applicants believed that SoMe involvement was beneficial to the application process, whereas 35% thought it added stress to the process and was detrimental, and 47% were indifferent. In total, 44% of respondents agreed or strongly agreed that they experienced stress over their SoMe presence during the application process, 23% were neutral, and 33% disagreed or strongly disagreed that they experienced stress (Table 3). Only 5% of respondents thought that more applicants should be involved in SoMe during the application process; 61% responded neutrally, and 34% wished that fewer applicants were involved in SoMe.

Univariate Analysis

Respondents who endorsed stress about maintaining a SoMe presence in PRS were more likely to compare SoMe with other applicants (77% versus 30%, $P < 0.001$) and wish that fewer applicants were involved in SoMe (49% versus 23%, $P = 0.030$).

Applicants who thought SoMe increased one’s chances of matching into PRS were more likely to have an advisor recommend that they maintain a SoMe presence (39% versus 9%, $P = 0.004$), more likely to think that SoMe is beneficial to the residency selection process (39% versus 9%, $P = 0.004$), and more likely to compare SoMe with other applicants (78% versus 39%, $P = 0.004$). These applicants, however, were not significantly more likely to post on SoMe at least once weekly. Instead, those who posted frequently were more likely to have a professional SoMe account (56% versus 25%, $P = 0.028$) and believe that SoMe is beneficial to the application process (50% versus 8%, $P < 0.001$), and less likely to think fewer applicants should be involved with SoMe (11% versus 40%, $P = 0.039$).

Multivariable Analysis

In a multivariable regression, the belief that SoMe increased one’s chances of matching into PRS was associated with an advisor/mentor recommending a maintained SoMe presence during the application process (OR 8.1, 95% CI 1.61–40.44, $P = 0.011$) and the feeling that SoMe is beneficial to the process (OR 17.1, 95% CI 2.4–120.1, $P = 0.004$) (Table 4).

Table 2. Comparing Characteristics of the Surveyed Sample with the National Applicant Pool

	Surveyed Sample Proportion (95% CI)	National Applicant Pool Proportion (95% CI)
Gender (% female)	56% (44%–67%)	56% (N/A*) ¹⁸
Geographic region	Northeast: 32% (22%–43%) South: 27% (17%–38%) Midwest: 30% (21%–42%) West: 10% (4%–19%)	Northeast: 24% (17%–33%) South: 44% (35%–54%) Central: 21% (14%–30%) West: 10% (5%–17%) ²⁰
International medical graduates	8% (3%–16%)	22.7% (N/A*) ¹⁹
Research year	33% (23%–44%)	25% (22%–29%) ²¹

Information on gender and percentage international medical graduates come from population-level data. Information on geography and research year experience come from previous national surveys. 95% CIs constructed using binomial distribution.

*Percentage comes from population-level data, not sample.

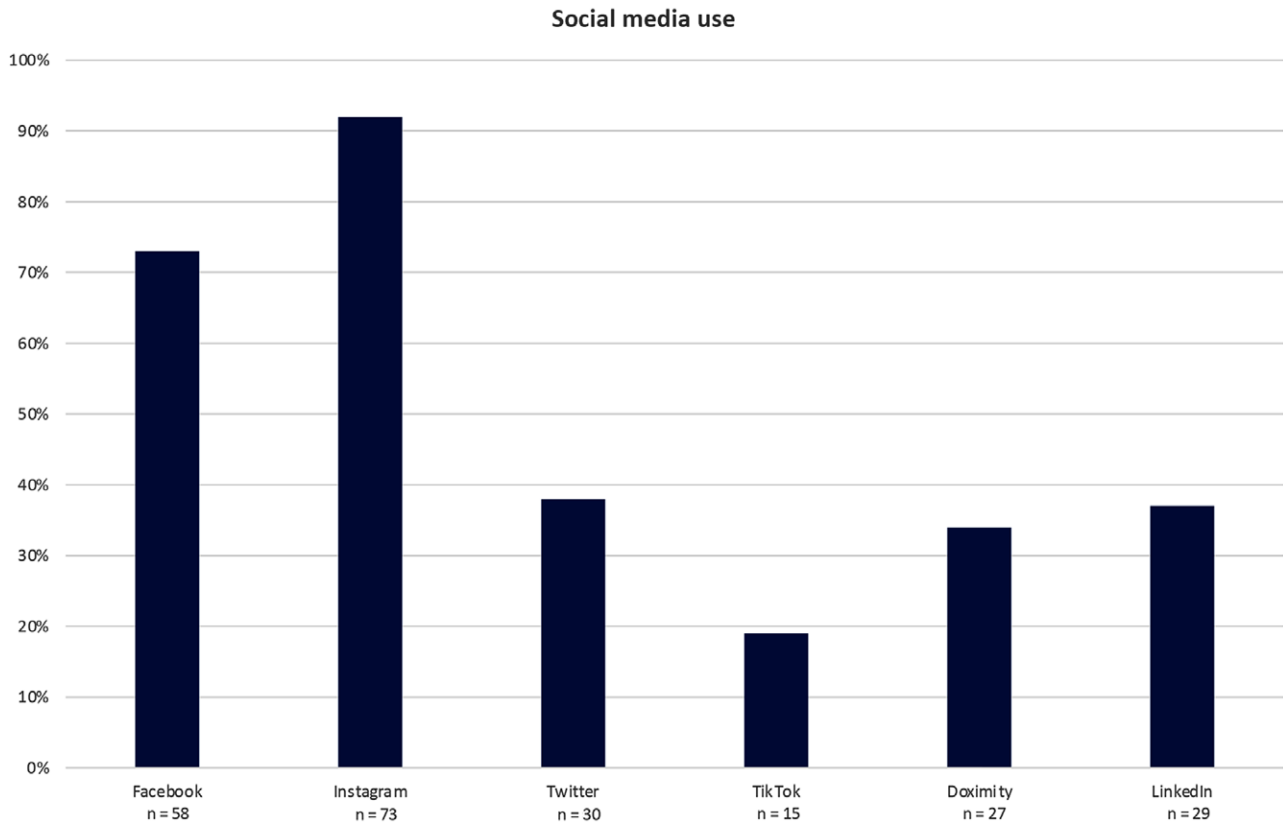


Fig. 1. The use of SoMe among integrated PRS applicants.

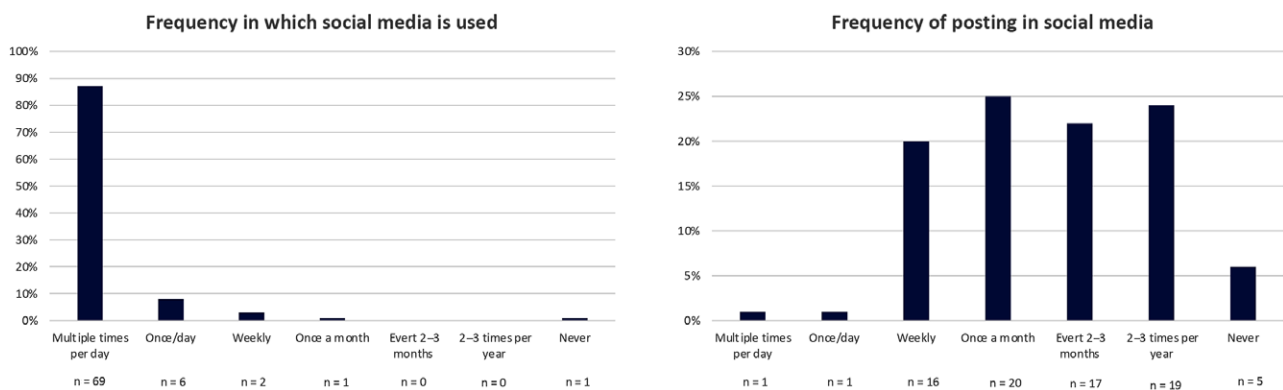


Fig. 2. The frequency of SoMe use among integrated PRS applicants.

In a similar regression model, those whose advisors recommended maintaining a SoMe presence had 6.31 higher odds of experiencing stress about maintaining a SoMe presence (95% CI 1.20–33.35, $P = 0.030$). Applicants who took at least one research year had lower odds of feeling stress about maintaining a SoMe presence (OR 0.16, 95% CI 0.04–0.70, $P = 0.015$) (Table 5).

Integrated PRS Applicant’s Perceptions

Five themes regarding the role of SoMe in the match were identified: opportunities and networking; learning about programs; insignificance of SoMe; harmful effects, including bias; and connecting with residents

(Table 6). Of these, the opportunities and networking theme was the most frequently mentioned. In particular, one respondent expressed that SoMe is “most beneficial in providing accessible, equitable information about research opportunities, residency program meet and greets, scholarships, and other professional opportunities.” SoMe may also give an applicant added visibility and help “programs put faces to names.” Other applicants believed that SoMe would serve as an opportunity to highlight aspects of themselves not apparent on the application by “show[ing] the program the applicant’s hobbies/interests, which may or may not help them match at a particular school.”

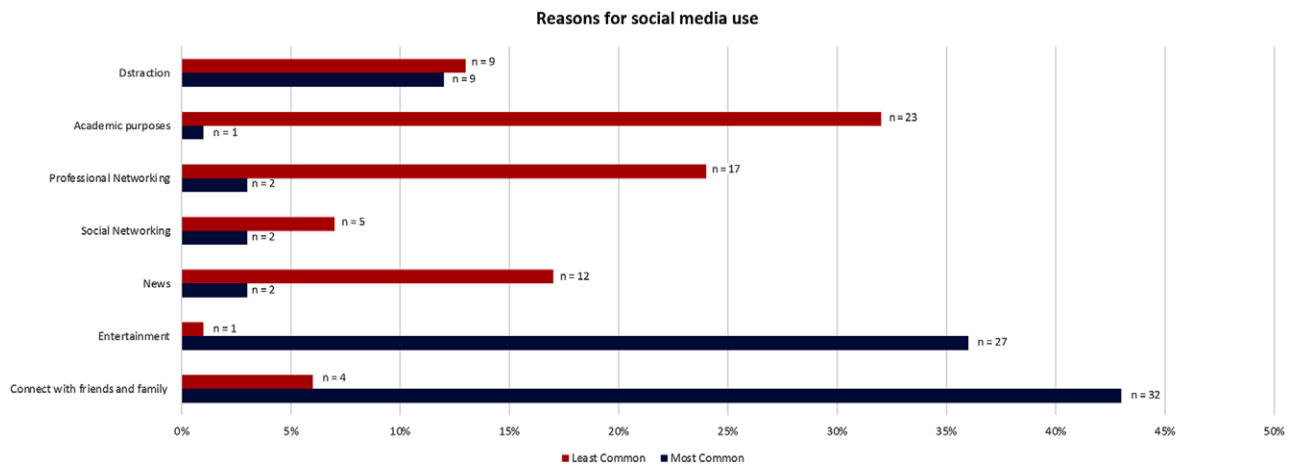


Fig. 3. The most and least common reasons for using SoMe among integrated PRS applicants.

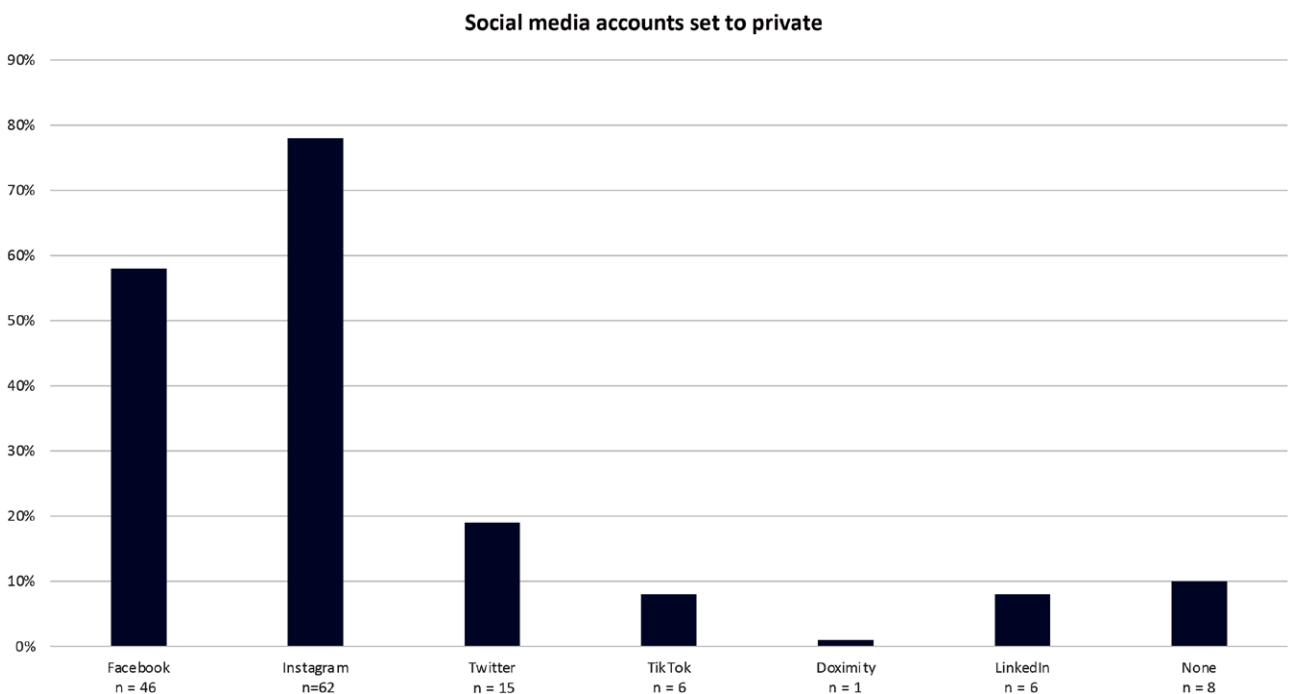


Fig. 4. Social media platforms that integrated PRS applicants set private.

However, other respondents were more skeptical about the impact of SoMe, with some questioning whether it matters at all and others commenting on the potential drawbacks of SoMe. Such responses included: “It feels like we ‘have to’ but everyone is so artificial on their social media accounts”; “from an applicant perspective, it’s a risk”; “I feel like a social media profile would only either be neutral (showing the applicant is a normal person) or potentially negative (if the applicant demonstrates unprofessional or controversial behavior).”

DISCUSSION

This study is the first to assess integrated PRS applicants’ perspectives on the use of SoMe during the match

process. We found that opinions were divided. A minority believed that SoMe increased one’s chances of matching (29% of respondents) or that it was beneficial to the application process (18% of respondents). However, most held either neutral (30%) or negative (41%) opinions about the role of SoMe in the application process, and 44% of applicants endorsed stress about maintaining a SoMe presence in PRS.

In recent years, a growing concern with the near ubiquitous use of SoMe among young adults is the risk it poses for developing or exacerbating anxiety, depression, and stress.²²⁻²⁵ A major source of stress for medical students is the disproportionately low availability of residency spots compared with the number of applicants.^{15,17,26} Our study demonstrated that the already competitive field of PRS

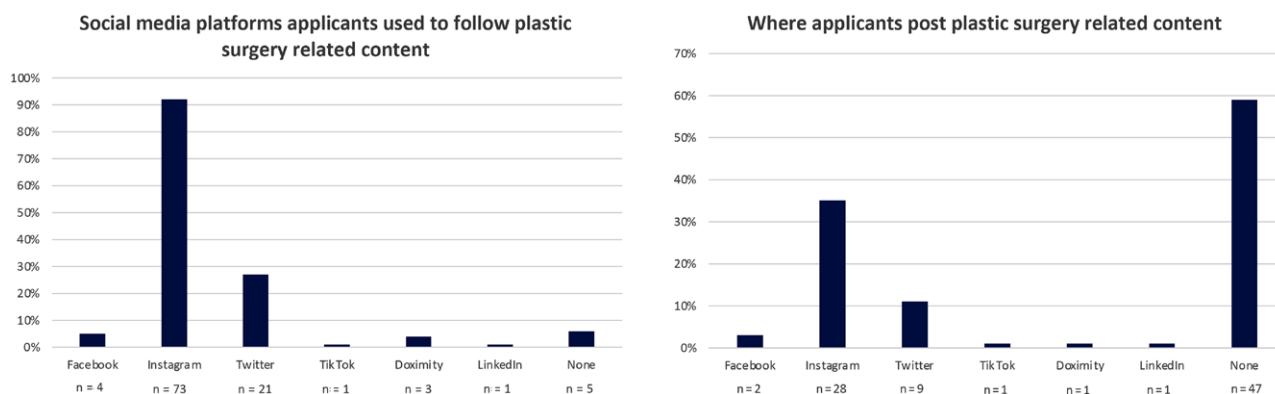


Fig. 5. Social media and plastic and reconstructive surgery.

Table 3. Perception of Social Media Presence and PRS

n (%)	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Feel having a SoMe presence increases the chances to match into plastic surgery residency	4 (5)	19 (24)	24 (30)	17 (22)	15 (19)
Experienced stress and/or anxiety regarding having and maintaining SoMe presence in plastic surgery	14 (18)	21 (27)	18 (23)	16 (20)	10 (13)

n, frequency.

Table 4. Multivariable Analysis of Applicants Feeling That Social Media Increases the Chances to Match into PRS Residency

	OR	95% CI	P
Advisor/mentors recommend SoMe presence	8.1	1.61–40.44	0.011*
Age	0.95	0.69–1.30	0.727
Gender			
- Female		Reference	
- Male	1.63	0.40–6.63	0.495
Region†			
- Northeast		Reference	
- South	1.05	0.20–5.37	0.954
- Midwest	1.02	0.19–5.48	0.979
- West	2.74	0.23–32.65	0.426
Feelings of SoMe and plastic surgery residency application process			
- Indifferent		Reference	
- It has value and is beneficial to the process	17.11	2.44–120.08	0.004*
- It adds stress and is determinantal to the process	4.56	0.99–20.94	0.051
Research year(s)	0.62	0.15–2.65	0.522
Posting at least once weekly	0.29	0.30–6.27	0.678

* $P < 0.05$.

†Pacific Islander and outside the United States excluded from the analysis as both had one participant.

may be gaining an additional layer of stress. A notable finding from our survey was that having advisors recommend SoMe use in plastic surgery was associated with applicants' feelings of stress. Comparing one's SoMe with other applicants was also correlated with stress. Contrary to our hypothesis, those who posted frequently on SoMe were not more likely to believe that doing so would increase one's chances of matching, but they were more likely to believe that SoMe played a beneficial part in the application process.

These results suggest that the anxiety applicants experience about SoMe stems from overall anxiety about competing for limited residency spots. Those who view SoMe as a "means to an end" in this competition, rather than as a beneficial resource, are more likely to be stressed by the

increasing emphasis on SoMe in the residency application process. In contrast, those who viewed SoMe as a beneficial resource were probably better able to avail themselves of the benefits of SoMe (eg, virtual support system, greater insight into programs) while minimizing exposure to the negative aspects of SoMe. Therefore, a healthy way for applicants to use SoMe may be to showcase their interests in a professional manner and connect with residents and other applicants with whom they already have a positive relationship. What is especially striking is that even a belief that SoMe confers an advantage in a competitive residency selection process was not enough to drive applicants to engage more on SoMe, perhaps due to countervailing forces such as the toll it can take on mental health, the effort required to create SoMe content, or the lack of privacy.

Table 5. Multivariable Analysis of Stress and/or Anxiety Regarding Maintaining a Social Media Presence in PRS Residency Application

	OR	95% CI	P
Advisor/mentors recommend SoMe presence	6.31	1.20–33.35	0.030*
Age	1.25	0.89–1.74	0.192
Gender			
Female		Reference	
Male	1.3	0.40–4.36	0.655
Region†			
- Northeast		Reference	
- South	0.91	0.22–3.86	0.900
- Midwest	1.57	0.36–6.89	0.550
- West	1.93	0.21–17.81	0.563
Feelings of SoMe and plastic surgery residency application process			
Indifferent		Reference	
It has value and is beneficial to the process	2.04	0.39–10.66	0.398
It adds stress and is determinantal to the process	1.81	0.54–6.14	0.339
Research year(s)	0.16	0.04–0.70	0.015*
Posting at least once weekly	0.52	0.12–2.16	0.368

*P < 0.05

†Pacific Islander and outside the United States excluded from the analysis as both had one participant.

Table 6. Thematic Analysis Based on PRS Applicants’ Feedback

Themes	Quotations
Opportunities and networking	<p>“It seems that a lot of connecting, and relationship building can happen, and you can increase your familiarity with certain programs and people builds community between co-applicants.”</p> <p>“The ability to virtually connect with people and build professional networks.”</p> <p>“It can provide information regarding networking opportunities.”</p> <p>“Social media (particularly Instagram) in plastic surgery is most beneficial in providing accessible, equitable information about research opportunities, residency program meet and greets, scholarships, and other professional opportunities for medical students applying to plastic surgery”</p> <p>“Makes you more visible as an applicant...gets your name out there and exposed to programs”</p>
Learning about programs	<p>“.. it gives you the sense of the culture of other institutions so you can spin your away rotation applications & interviews appropriately.”</p> <p>“It also allows you to get to know programs better if you follow their program Instagram page.”</p> <p>“I think it is most beneficial for the applicant in terms of being able to find information”</p> <p>“Helpful for learning about meet and greets.”</p>
Insignificance of social media	<p>“I do not think program directors care to check accounts.”</p> <p>“There is no correlation between social media engagement and match success in my experience.”</p> <p>“Shouldn’t influence admission into residency program”</p> <p>“I believe that there is an element of programs knowing your name from social media, but do not think that it gives anyone a leg up with regards to matching.”</p>
Harmful effects and bias	<p>“Don’t think it helps most applicants but has a higher likelihood of hurting you. Programs don’t think you’re a ‘good fit’ based on your posts or based on the fact that you have two separate accounts.”</p> <p>“It would appear suspicious to not have a social media footprint of some form.”</p> <p>“I feel like a social media profile would only either be neutral (showing the applicant is a normal person) or potentially negative (if the applicant demonstrates unprofessional or controversial behavior).”</p> <p>“Social media can introduce a lot of bias and should not be considered when considering a residency and when residencies consider applicants”</p>
Connecting with residents	<p>“It is an opportunity for residents to see what you are like/what your interests are outside of school/medicine.”</p> <p>“Residents can get to know you and your interests via social media. I think probably only helpful if residents have a say in selection process though”</p> <p>“My account was private and only 1-2 official program pages followed me, but a handful of residents at those institutions followed me which may have influenced their opinions of me”</p>

Advisors play a crucial role in students’ applications to PRS residency and their perceptions of the field. Our survey found that applicants with an advisor who recommended maintaining a SoMe presence in PRS were more likely to believe that SoMe engagement increased one’s chances of matching and more likely to feel that SoMe played a beneficial role in the application

process; however, they were also more likely to experience stress about maintaining a SoMe presence in PRS. These results suggest that advisors may seek to reassure students that although SoMe engagement may allow applicants to gain additional exposure to residency programs, it is not the only factor considered during the match.

Our study may address a gap in the literature regarding how PRS applicants view the growing role that SoMe plays in the residency application process. During COVID-19 and the transition to virtual interviews, PRS residency programs have increased SoMe use for recruitment.²⁷ Given that the majority of MD and DO programs in the United States lack home PRS programs, SoMe may increase medical student exposure to the field and provide insights into specific residency programs.²⁸ Our study contextualizes these previous findings by showing that following PRS content on SoMe was not a significant predictor of one's own SoMe activity. In fact, even those who thought that SoMe could increase one's chances of matching did not post more frequently and were not more likely to have professional accounts. These results suggest that most applicants probably prefer to use SoMe as a one-way avenue that enables them to understand residency programs better without putting their own profiles on display.

Although residency programs use SoMe for a variety of reasons, including the creation of more equitable access to educational and program-based information, some programs do consider SoMe profiles in the evaluation of applicants. In a study from 2012, 17% of program directors of surgery and surgical subspecialty residency programs reported reviewing an applicant's SoMe content to gain more information during the review process. Within this group of program directors, 33% also reported ranking applicants lower after viewing SoMe.²⁹ Now, more than ten years later, this percentage may be even higher. Research has found that these rankings adversely affect women and underrepresented minorities at higher rates than other groups.³⁰ Applicants may therefore benefit from recommendations on how to interact with programs on SoMe (eg, using a personal versus a professional profile) and guidelines on how SoMe will be evaluated in rankings.³¹ Indeed, the vast majority of respondents used SoMe primarily for non-academic purposes, implying that the stress about maintaining a SoMe presence in plastic surgery was likely due to concerns about professional SoMe use. Previous work developing frameworks for ethical and professional SoMe use by plastic surgeons could serve as a useful educational tool which may reduce some of the anxiety surrounding SoMe use and also make the process more equitable.³²

The hesitancy to embrace SoMe during the application process and the stress created by SoMe, especially at the urge of advisors, suggest that there is confusion over how SoMe factors into the competitive residency match process. The general absence of official policies or norms is therefore a problem that needs to be addressed. PRS residency programs, for instance, could inform applicants that although the selection process cannot be totally blinded from information available online, review of SoMe profiles does not play a regular or formal role in the evaluation process and that program leadership does not query each applicant's SoMe profiles. Overall, our survey suggests that residency programs should strive to make engagement with their

SoMe platforms a beneficial and worthwhile experience for their audience, to avoid posts that promote comparison and competition, and to develop explicit policies around applicant evaluation that discourage comparison.

Limitations

The generalizability of this study is limited by its response rate and its single-institution design. Although it was difficult to conduct a comprehensive nonresponse bias analysis due to a lack of information available about the national applicant pool, our analysis suggested that our sample was representative of the national pool in terms of geographic distribution, gender distribution, and percentage of respondents who took a research year, although international medical graduates were underrepresented. Looking ahead, surveys of program directors could serve as a complement to this study by illuminating differences between the perceptions of applicants and the actual practices of program directors. Future research can also explore the relationship between SoMe use and PRS residency match rates and investigate applicants' views of SoMe in the context of their future careers. Finally, exploring the effects of race, the size of one's SoMe following, and the type of medical degree program (MD versus DO) on one's views of SoMe would also be worthwhile.

CONCLUSIONS

The use of SoMe during the PRS match process was a source of stress for many applicants, particularly those who compared their profiles with other applicants' profiles and those whose mentors advised them to maintain a SoMe presence in PRS. The hesitancy and anxiety of applicants regarding SoMe suggest that there is a lack of clarity about how residency programs use and potentially evaluate SoMe during the competitive residency match process. Residency programs may address this problem by implementing official policies which promote the use of SoMe as a source of information and community-building and minimize the potential for competition and comparison, especially with regards to the match.

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DISCLOSURE

The authors have no financial interest to declare in relation to the content of this article.

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