To Catch a Catfish: A Cautionary Tale of Internet Unprofessionalism

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As educators, we spend countless hours role modeling, teaching, and mentoring learners regarding professionalism as a core competency of medicine. Despite these efforts, medical students, the majority of whom are savvy with the use of technology and social media, sometimes forget that their actions on the internet leave a permanent trail that is very difficult to conceal. We share a tale of an attempted anonymous, unprofessional act by a medical student directed at our pediatrics residency program and unearthed by our own residents, which led to our dismissing a candidate from our program's rank order list.

Several years ago, 9 days before the residency Match rank order list certification deadline, our program leadership, chief residents, and program coordinator received a personal email from an individual investigating opportunities for a visiting rotation. The person identified themselves as a third-year medical student (MS3) at a medical school from another region in our state. The student claimed to have heard that one of our inpatient services was "dysfunctional" and described the rotation in a disrespectful tone, unexpected from a medical student. Despite multiple offers to discuss these concerns personally, the student declined to meet by video conference.

The online supplementary data figure summarizes the timeline of our response. Our assistant dean contacted the dean of this student's purported medical school. After a short investigation, the dean reported that no student by this person's name had matriculated to their school. Our chief residents and 3 senior residents conducted a broad internet search using the email address of the presumed MS3 and identified a single hit: a post on an anonymous chat board for medical trainees. This account had posted sporadically over the past decade. One early post directed members interested in purchasing textbooks to respond to a different email address. This second email address appeared to share a surname with a well-liked, current-year applicant to our residency program. The names and photos of this applicant and their sibling were found on publicly available social media profiles as well as testimonials on a local wedding planner's website. Thus, we confirmed the identity of the original emailer as a current applicant to our residency program. This applicant had rotated in our hospital, engaged in a research mentorship opportunity, and held a high position on our program's rank order list. Once suspected, the applicant's research mentor texted the student neutrally to "check in" as recruitment season was closing. The student used phrases in the text similar to those shared in the original email messages to our program leadership. The language was nearly identical and critical. Following our investigations, and 5 days before the rank order list certification, we removed this student from our rank order list.

We present this case as an unusual example of "catfishing." Merriam-Webster (2024) defines a catfish as "a person who sets up a false personal profile on a social networking site for fraudulent or deceptive purposes."[1] Although this term is often used in the context of online dating, in our case, a medical student had created a false persona for communicating with our program prior to the Match. The program's faculty and residents would have been happy to field questions about our inpatient rotations had the applicant transparently represented themselves.

While notably little is available in the literature demonstrating the impact of e-unprofessionalism on the careers of medical students and residents, one scoping review of publications involving primarily medical health professionals identified "loosening accountability" (damage to the professional image), "blurred professional boundaries" (eg, blended profiles), and "depiction of unprofessional behavior" (eg, demeaning content about clinical sites) as recognized social media dangers.[2] Far less is known regarding catfishing, particularly outside of the online dating world. One extreme example involved an individual fraudulently emailing a residency program claiming to be a current applicant and asking to be withdrawn from consideration, leading to the applicant's loss of

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Editor's Note: The online supplementary data contains a visual summary of the timeline of responses.

their desired program placement and ultimately felony and misdemeanor charges against the perpetrator.[3] Catfishers' motivations may be for entertainment—younger catfishers in particular may find humor in the act—or for emulating the ideal self.[4] Ironically, the "catfisher" in our scenario had created an online persona that was considerably less likable than the real person. Catfishing among celebrities to assume an inauthentic racial or ethnic identity to fit online popular trends and aesthetics presents a more seriously concerning example of the behavior.[5] Regardless of the personal characteristics, intrinsic motivations, or pursued outcome of the behavior, catfishing represents dishonesty and less than ideal integrity. E-unprofessionalism among medical professionals may result in risk to future employment, legal consequences, or disciplinary action on the part of a state medical board.[2] The duplicitous nature of the communication, not their negative comments regarding our residency program, compelled us to remove the applicant from our rank order list.

We have reflected extensively on what we learned from this experience. Interestingly, while students appear more concerned than faculty with their professional image online, their online behavior does not universally align with this concern[6]; as we observe in our vignette, the temptation remains to make impulsive online communication decisions when anonymity is assumed. We offer the following recommendations to medical trainees, medical school faculty, and residency program leadership:

- Medical trainees: While the impact of personal image in social media on a trainee's professional life (eg, employment, advancement, licensing/credentialing) may be obvious, trainees should be reminded that elucidating the identity of an anonymous poster or a catfisher is possible. Residency and fellowship programs are interested in training early career physicians who demonstrate disciplined professionalism and integrity, including transparency.
- Medical schools: Many medical schools and professional societies have devised guidelines for social media use.[2] Curricula informing students of these guidelines, perhaps incorporating real-world examples of professionalism lapses, should be delivered at a regular cadence. Moreover, coaching should be available for students who are uncomfortable asking residency programs challenging questions, so that catfishing doesn't become their approach to avoiding a difficult conversation or asking difficult questions.
- Residency program leadership: Graduate medical education leaders are likely accustomed to viewing social media profiles of applicants. We describe a slightly convoluted but rather swift journey to identifying an applicant who emailed us untruthful and disparaging statements regarding our program behind the mask of a false email address and name, with little interest in engaging in open dialogue. We champion the right of this applicant to their opinion and free speech; we simply took issue with their dishonest methods. While future similar incidents may be uncommon for ours and for others' programs, we hope to empower training program leadership, particularly chief residents who may be more innovative and savvy with following the e-breadcrumbs, to protect themselves from matching digitally unprofessional applicants.
- For all stakeholders, we are cognizant of the inherent power differential between applicants to residency programs and residency program leadership. We recognize the importance of applicants having a venue for anonymous communication about the challenges of the application process; this is an important role for several internet-based venues valued and trusted by medical students. In general, we do not advocate for routinely trying to link anonymous personas with real-life applicants. At the same time, we believe that engaging in deception when communicating directly with program leaders crosses a boundary of professionalism and should not be accepted.

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