



ABPM

The American Board
of Podiatric Medicine

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May 19, 2016

The Honorable Johnny Isakson
Chairman
Senate Veterans Affairs Committee
412 Russel Senate Office Building
Washington, DC 20515

The Honorable Richard Blumenthal
Ranking Member
Senate Veterans Affairs Committee
412 Russel Senate Office Building
Washington, DC 20515

Dear Chairman Isakson and Ranking Member Blumenthal,

The American Board of Podiatric Medicine (ABPM) is one of the two certifying boards recognized by the Joint Committee on Recognition of Specialty Boards under the authority of the American Podiatric Medical Association. In response to the communication you received by the American Academy of Orthopedic Surgeons (AAOS) dated February 23, 2016 the ABPM provides you with the following information:

- The AAOS assertion that the issue before the Senate relates to the podiatric scope of practice is entirely without basis and merit. This Bill speaks to the existing level of podiatric services provided that are not compensated at a rate commensurate with the scope and depth of participation and input innate to podiatrists performing those services. Ironically the communication generated by the AAOS is from afar and not representative of the orthopedists employed by the VHA who are better equipped to corroborate the reality of what is contained within this communication. Some sobering facts:
 - A total of only 16 orthopedic foot and ankle specialists exist in the entire system, totaling 4 FTE employed by the VHA. Their impact on foot and ankle surgery is therefore negligible by way of volume.
 - By comparison over 400 podiatrists exist in the system. Accordingly 85% of the foot and ankle surgical procedures are performed by the Podiatric Medicine service.
 - Add the non-surgical aspect of care rendered by the Podiatric Medicine service, and the relative impact on foot and ankle care in the VHA system by Podiatric Medicine versus Orthopedics is readily apparent.
- Podiatric physicians prescribe medication, perform surgery, take emergency call, actively participate in routine clinical and emergency department care and interface with other specialists and hospital staff in the exact same manner as do all other physician services.
- The multidisciplinary aspect of care in a Veterans Administration hospital setting in which podiatry is featured prominently is such that Podiatric Medicine is often relied upon with a proven successful track record of outstanding outcomes for this patient population. Many of these patients have significantly compromised health as a result of multisystem disease, particularly diabetes, and podiatric services are essential to their care. Most frequently Podiatric Medicine collaborates with Vascular Surgery, Infectious Disease, Endocrinology and Orthopedics as well as a myriad of other services. Podiatric services are in no way



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ancillary or subrogated to any of those services. In many instances Podiatric Medicine is the first service encountered by these patients, and is in fact relied upon by the services referenced to manage the vast majority of these patients' foot and ankle conditions both surgically and non-surgically.

- Podiatric physicians, as the regional specialists of the foot and ankle, are depended upon to provide services in a primary fashion within the VA system because of the specialty's broad expertise in the management of foot and ankle conditions. Comparatively orthopedics, as a system-based specialty, does not routinely provide the scope of foot and ankle services required due to its obligations in primarily treating musculoskeletal pathology in all other areas of the body.
- Podiatrists in the VA system have, on occasion, been elevated and promoted to lofty administrative positions (i.e. Chief of Surgery) often making half of the salary of the physicians for whom they are responsible.

Following 4 years of undergraduate training, another 4 years at the podiatric medical school level and an additional 3 years spent in residency training specializing in the foot and ankle graduating podiatric residents are prepared to sit for the examinations administered by the American Board of Podiatric Medicine. The number of foot and ankle cases, both surgical and non-surgical, required for completion of a podiatric residency far exceeds that of a resident in orthopedic surgery, as well it should, based upon the level of specialization required to administer comprehensive foot and ankle care.

The examinations administered by the American Board of Podiatric Medicine include the following subject areas:

ORTHOPEDICS SUBSECTION

1. Biomechanics/Pathomechanics/Orthotics
2. General Orthopedics
3. Pedorthics
4. Rehabilitation & Physical Therapy
5. Surgical Criteria
6. Trauma & Sports Medicine

MEDICINE SUBSECTION

1. Cardiology & Pulmonology
2. Dermatology
3. Emergencies
4. Endocrinology
5. Gastroenterology & Nephrology
6. General Medicine
7. Hematology & Oncology
8. Infectious Disease
9. Neurology
10. Peripheral Vascular Disease
11. Psychosocial, Community
Medicine, Public Health,
Biostatistics
12. Rheumatology
13. Wound Care



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In conclusion, we hope that the information provided clarifies the reality underlying the nature of podiatric services provided in the VHA, the nature of podiatric training and the requirements and rigor of the board certification process so that the Senate Veterans Affairs Committee can make a truly informed decision regarding equal compensation for equal work in the Veterans Administration.

Marc Benard, DPM
Executive Director

Steven L Goldman, DPM, MBA
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