ACFAS 2026
Meet the Fellow Questionnaire

American College of Foot and Ankle Surgeons®

Fellow Name:

Anthony Schwab, DPM, MS, AACFAS

Fellowship Program:

Northern California Reconstructive Foot and Ankle Fellowship

City/State:

Redding, CA

Program Director:

Garret Strand, DPM, FACFAS

How many Attendings do you work with regularly?

Majority of the fellow's cases are with Dr. Strand, Dr. Martini, Dr. Cook, and myself. There are opportunities to scrub cases with orthopedic traumatologists in down time (which is minimal) but encouraged if there is an interesting case during clinic time.

Describe the diversity of your cases so far in fellowship. (For example, has your experience included TAR? Is there an emphasis on: Pediatrics? Sports Medicine? Deformity correction? Complex reconstruction? What percentage of your cases are trauma? Rearfoot/ankle? Forefoot? Please be as descriptive as you'd like.

The focus is split between ankle, rear foot and forefoot reconstruction with an emphasis on total ankle replacements, complex revision surgery, acute and chronic trauma, sports medicine, reconstructive cases.
The fellow will complete about 700-800 cases/year with the bulk of cases being larger reconstructive work. I finished with 814 cases this year.

How many days per week do you typically spend in the OR? In clinic? Do you have your own "fellow" clinic?

One to two full days of clinic. This year was somewhat unique for me, as I had my own clinic, while Dr. Strand had his own patients on the other side of the hall. He was readily available for any and all questions I had when I started. I saw from as low as 30 ish patients a day to as many as 50+ with Dr. Strand seeing over 60 on his side.
The fellow will see, treat, and bill patients on your own. Injections, surgical consults, pre and post ops. No palliative care. Three full days of OR. Dependent on facility, either in one or two ORs. Add on trauma cases are common in the PM any day of the week. Weekend cases with trauma doctors are optional. Cases range from 4-12 cases/day.

How many surgical cases do you typically scrub per month?

The fellow will generally scrub anywhere from 15-25 cases in a week with about 60 to 80 in a month.

What conferences have you attended/are you encouraged to attend?

The fellow and director attend ACFAS each year. You are allowed to attend any of the fellowship courses offered.
Fellow will also have to opportunity to speak at local hospital conferences and assist with making presentations.
I attended Stryker fellows course, the western, and had the opportunity to spend time at Duke with their attendings and fellows which was an incredible experience.

How would you describe your director's teaching style?

Attendings set very high expectations and challenge your ability to think critically in clinic and in OR. Consistency, efficiency, and repetition are all emphasized on a daily basis.
Mistakes are inevitable in surgery, but learning to be efficient and avoid prior pitfalls are expectations from all attendings.

How is research incorporated into your experience? What resources are provided/available?

Research is encouraged with the expectation of one peer-reviewed publication per fellowship year. This year I was on 10 publications but it is really up to the fellow how much energy they'd like to put into this initiative. We are establishing a total ankle database with plenty of ankles to pull long term data from 600+ ankles.

Do you take any "call"? If so, how often? What type of call? (general vs. trauma, hospital vs. private practice?)

The fellow takes call for the practice on weekday evenings/nights and over the weekend generally answering post op questions. Occasional consults at the hospital but rarely overnight.

How many hospitals/surgery centers are you credentialed at?

We currently operate out of two main hospitals, and two main surgery centers within Redding. All facilities are within 10-15 min from each other.

What is your didactic schedule like? What academic opportunities are available to you during fellowship? (Cadaver labs, journal club, radiology conference, etc.)

The fellow presents the weekly cases at radiology rounds every Tuesday AM. Monthly group journal clubs and monthly case presentations with the MKE residents.

Is your fellowship affiliated with a residency program? If yes, what are your responsibilities? How often are you interacting with residents (What % of cases?)

Yes, we have an affiliation with the Ascension program in Milwaukee, WI. Each resident spends two weeks with us in clinic and surgery. We do a monthly academics via zoom.

Are you able to collect cases for board certification?

No, cases are not counted toward board certification. With a well-rounded and the advanced training received, the fellow should be able to accumulate these in the years post fellowship without issues.

When should interested applicants visit? What does a visit look like?

For applicants interested in the program, they should reach out via the email address on the ACFAS website. After review of applications received, visitation are offered to selected applicants.Visits are two days in order to see the clinic, the OR as well as the local area and typically occur during the fall and early winter of PGY2 year.

What is the interview process like at your program?

Applications are generally due around January 1st.
We then select applicants for a zoom academic interview after ACFAS conference and select a fellow shortly thereafter.

Do you have a co-fellow? What percentage of your cases are scrubbed with them?

We only take 1 fellow per year. You get to scrub whatever cases you want.

What support is available for finding post-fellowship employment?

Attendings will make calls on your behalf, write letters of recommendation, etc. Attendings are happy to read over contracts and support any time off you need to visit employment options.

What qualities make an applicant a good fit for your program?

We look for someone who is well rounded, willing to work hard, learn, grow, take feedback and be adaptable.

Why did you apply for fellowship? And why did you choose your fellowship program?

I think I always wanted to do fellowship and it was really just something the folks I looked up to were doing who were excelling in the field. I think the pendulum has really been swinging these last few years toward fellowship training.
Admittedly I was always drawn to total ankles-they were the “in vogue” thing when I was a student and I think at first I appreciated them for the wrong reason. As a student I just wanted to be that surgeon that “did hard things”. But this operation is one of the many we do that is really life changing for patients-and can be life altering when not performed correctly. Learning to perform them confidently and efficiently only comes with time, and reps. Also wanted to have exposure to revision totals, which are most certainly not a second primary.
When searching for fellowships I really wanted a program that was very high volume with autonomy and I believe our fellowship offers that. The experience I’ve had here has allowed me to sharpen the sword and make lasting relationships within our profession that will last a lifetime.

Any advice for future fellowship applicants

A extra year of training is a choice and a big commitment. My advice would be to fully invest yourself into that year. You have 12 months to learn and absorb as much hands on and off training as possible before entering into the real world where now you're the one calling the shots. The best quality in a Fellow is work ethic and this is something we look for.