

Update



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Meet the Newest ACFAS BenefitsPartner: EHR-Prep Select

Are you looking to maximize reimbursement with an electronic health record system (EHR)? ACFAS has formed an exclusive podiatric relationship with Welch Allyn's EHR Prep-Select consulting program. This newest ACFAS BenefitsPartner is designed to relieve stress and inform decision-making when choosing an EHR system.

EHR Prep-Select systematically guides foot and ankle surgeons and their practices through the complex EHR preparation and selection process by offering an optimal mix of:

- Expert consulting
- An easy-to-follow 10-step project plan
- An intuitive, web-based EHR vendor selection tool

The Health Information Technology for Economic and Clinical Health Act calls on every physician to move toward a designated and certified EHR system. Working with EHR Prep-Select will help ACFAS members achieve "meaningful use" and qualify

for federal incentive money offered to those up and running in 2011.

Welch Allyn will be at the ACFAS 2011 practice management seminars in Cleveland, Ohio, May 13–14, and Las Vegas, Nev., Oct. 14–15.

This arrangement can be beneficial to your practice — at preferred pricing for ACFAS members. EHR-Prep Select also has relationships with the American Society for Gastrointestinal Endoscopy; TransforMED, a subsidiary of the American Academy of Family Physicians; and the Ohio Information Partnership.

More information about EHR Prep-Select will be available soon at acfas.org, or contact Kristin Hellquist Cunningham, ACFAS Director of Health Policy, Practice Advocacy and Research, at kristin.hellquist@acfas.org or 773-693-9300, x1322. ■



Catanzariti to Receive Distinguished Service Award



Alan R. Catanzariti,
DPM, FAFAS

Alan R. Catanzariti, DPM, FAFAS, is the 2011 recipient of the ACFAS Distinguished Service Award. This award is presented annually by the ACFAS Board of Directors to

recognize long-term, behind-the-scenes volunteerism to the profession and the College. Catanzariti was selected for his career-long work in residency training, ACFAS education programs and Clinical Practice Guidelines (CPGs).

"I was always interested in learning and education," says Catanzariti, "and immediately after I graduated from residen-

cy training in Pittsburgh, I became involved in teaching in the same program. I've been part of it ever since."

Continuing medical education requires a somewhat different approach. As Catanzariti explains, "Residents spend all their time learning, immersed in day-to-day educational opportunities and academics, whereas a practitioner has very limited time. You need to take information and condense, consolidate and focus it, so that people can listen, learn and take something home to apply to their practice. When I served as chair of the ACFAS Annual Scientific Conferences I always kept this in mind, and I think the College has always done this very well."

Come as you are!

On-site Annual Scientific Conference registration is open March 8–11.

For details visit acfas.org/ftlauderdale.

Catanzariti continues to work for the expansion of knowledge as chair of the College's CPG Management Council. Although he's only recently become involved, he has a clear vision of the path ahead.

"There are many people before me who have done a phenomenal job developing the CPGs, including John V. Vanore, DPM, and James L. Thomas, DPM," Catanzariti says. "Our committee wants to ensure our CPGs reflect the opinions, ideals and principals of ACFAS. We are trying to develop a process to produce CPGs that align with other organizations' CPGs, that are compatible with the College's goals and

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First, Do No Harm

By Michael S. Lee, DPM, FACFAS
President

It is one of the tenets we all live by in our surgical practices: Do no harm. A simple concept. In the process of trying to help your patients, don't make their condition worse ... or create a new problem.

As I reflect on my term as president, I realize "doing no harm" was my approach to the College as well. The fact of the matter is that your College is so effective, so well versed, and so capable that I quickly learned my main job was to stay out of the way. No other podiatric organization has demonstrated such efficient governance, dedicated volunteers, or professional staff.

A well-meaning past president once told me that being president of ACFAS was an opportunity to "drive the bus." If that's the case, the bus is on cruise control! The ACFAS staff is second to none. They are the folks behind the scenes that keep the College moving and the numerous committees on task. They should be applauded for their efforts, and I thank each of them for their dedication.

Last year in Las Vegas after my installation, several people asked me what "my special project" would be as president. I am proud to say I didn't have one. We have detailed strategic and business plans that are completely embraced by the Board of Directors, so my job was to make sure the College stayed "on plan." It wasn't my opportunity to push my personal agenda or pet projects. I wasn't about to veer the bus off the road!

With just a few weeks remaining until I pass the gavel to Glenn M. Weinraub, DPM, it is clear to me that presidents come and go. The College is here to stay. Dr. Weinraub will be an excellent sentinel. He

understands what makes ACFAS great — superior continuing medical education, the *Journal of Foot & Ankle Surgery*, consumer education, and professional advocacy. It will soon become his job to make sure the College and the board stay true to our strategic initiatives.

I am very proud of the work that ACFAS has achieved over the past several years, none of which I will take credit for but all of which I am proud to say I was a part of, including: the growth of *JFAS* and

**I thank each of you.
It has been my
pleasure and honor
to be a part of your
professional life.**

conversion to a new management council; a membership increase of over 15 percent; fiscal responsibility with cash reserves now approaching 90 percent of our operating budget; growth in our e-Learning initiatives; new websites; the development of our international affiliate status; and a new focus on residents and students — the lifeblood of the organization. I am also very proud of the membership autonomy that ACFAS has achieved without disrupting the organization or the profession, despite what some believed.

During my nearly seven years on the board and 12 years of involvement in the College, I have had the privilege to meet and know hundreds of talented people. Many of you have become dear friends. All have worked tirelessly on behalf of

the College — sometimes without the recognition they deserve. Whether a past or present board member, a speaker at the annual scientific conference, a committee member, or a member with a passing smile — I thank each of you. It has been my pleasure and honor to be a part of your professional life.

In closing, I will leave you with a final thought. The American College of Foot and Ankle Surgeons is as healthy as it has ever been. We are also in good hands. From Dr. Weinraub, to the rest of the board, staff, committee volunteers, and the rank and file members we have never been so strong! I will fade away comfortable with the fact that I did no harm and always acted in the best interest of your College. ■



ACFAS Gives Thanks for Its Committee Volunteers

As we approach the end of the committee year, ACFAS gives thanks to those talented, dedicated members who have devoted their time and expertise in service on the College's committees.

Our volunteers are the lifeblood of the College who ensure the College meets its vision, mission and strategic initiatives. Together with the Board of Directors, over 200 members serve on 12 committees that create and provide oversight of all programs, services and policies. For links to more, visit acf.as.org/update.



Rubin

Steinberg

Board of Directors Election Results

In balloting that concluded on Jan. 24, members of the College elected two new members to the ACFAS Board of Directors:

- Laurence G. Rubin, DPM, of Mechanicsville, Va., for a three-year term
- John S. Steinberg, DPM, of Washington, D.C., for a three-year term

Retiring from the board are Mary E. Crawford, DPM, who was first elected to the board in 2005; and Douglas G. Stoker, DPM, who was first elected in 2006.

Continuing on the 2011–12 board will be Glenn M. Weinraub, DPM, President; Michelle L. Butterworth, DPM, President-Elect; Jordan P. Grossman, DPM, Secretary-Treasurer; Michael S. Lee,

DPM, Immediate Past President; Richard Derner, DPM; Kimberly Eickmeier, DPM; Sean T. Grambart, DPM; Thomas S. Roukis, DPM, PhD; and Jerome K. Steck, DPM.

The 2011–12 Board of Directors will be installed at the Honors and Awards Ceremony on March 10 during the Annual Scientific Conference in Fort Lauderdale, Fla.

Also, by a 95 percent majority, members were in favor of conducting future ACFAS elections by a secure, online system that would save ACFAS approximately \$3,500 per year. The ACFAS staff will investigate such systems for next year's board elections, including paper ballots to those members with no e-mail address.

Find Benefits in Your Backyard

ACFAS Regional Divisions

Have a desire to get more involved in ACFAS education and events, but not able to travel? ACFAS' 14 Regional Divisions are working around the country to bring you opportunities for local connections.

Some recent activities include:

- Division 1: Pacific held their annual Research Symposium on Jan. 26, on the campus of Western University of Health Sciences.
- Division 4: Desert States held a seminar, "Current Concepts in Care for the Lower Extremity," Oct. 8–10, 2010, in Scottsdale, Ariz.
- Division 8: New England held their annual Complications Conference on Jan. 22 in Providence, R.I.

Also, ACFAS education hit the road in 2010, when ACFAS Division 2: Northeast/Canada; Division 5: Florida; Division 14: Southeast and Division 6: Midwest took part in the "ACFAS Coming to You" 1st MTPJ A-Z Workshop and Seminar. Each program was a booming success, and the Divisions plan another round of regional "ACFAS Coming to You" programs in 2011. Watch for more information about hosting Divisions and program topics, coming soon.

In preparation for the full Division Presidents Council meeting at ACFAS 2011 Annual Scientific Conference, many Divisions have held elections in the past few months. New leaders are honing their skills by developing new educational programs for their local communities.

If you want to learn more about Division plans in your area, and are attending ACFAS 2011 in Fort Lauderdale, come to your Division's membership meeting during the lunch hour. Look for the Division schedule inside your conference brochure. When you attend your Division's meeting, you will also be entered in a drawing to win a 64 GB Apple iPad — don't miss out! ■

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Gain New Knowledge with Free Podcasts and Videos

A valuable library of information on the diagnosis and treatment of foot and ankle conditions is at your fingertips at ACFAS e-Learning. Check out the latest podcast, a discussion on “Forefoot Complications.” And coming March 1 is a new Scientific

New Podcasts:

- Imaging
- Forefoot Complications
- Deformity Correction (release date: March 1)

Latest Scientific Session Videos:

- Ethical Issues in Surgical Decisions
- Complex Cases in Foot and Ankle Surgery (release date: March 1)

Session Video, “Complex Cases in Foot and Ankle Surgery.” There are often multiple ways to treat a problem. In this session, surgeon panelists discuss different treatment options available for specific conditions.

ACFAS members are eligible to earn free continuing education contact hours with selected materials on the site. Visit often to refresh your knowledge with the latest offerings in video, podcast, and DVD at acfas.org/elearning. ■

ACFAS Membership Reaches All-time High

Now, more than ever, podiatric foot and ankle surgeons value their affiliation with ACFAS. Thanks to you, the College is celebrating a banner year for 2010, having reached an all-time high membership of more than 6,300 members.

As the organization continues to grow, so do the benefits of membership. 2011 will see focus on the growing e-Learning library, mobile apps for the College’s websites, credentialing and privileging support, and additional tools for practice management and marketing, along with a continued commitment to trusted resources such as the *Journal of Foot & Ankle Surgery*, surgical seminars and workshops, and the Annual Scientific Conference. Visit acfas.org to learn more about the many projects going on at your podiatric surgical organization.

Dues invoices for the 2011 calendar year have been sent to all members. If you haven’t yet renewed, it’s not too late! Just contact the College at 800-421-2237 during normal business hours, or visit acfas.org/paymydues.

Catanzariti to Receive Distinguished Service Award

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objectives, and that communicate accurate information to individuals and groups who seek advice and counsel from these documents.”

“Dr. Catanzariti brings an exceptional track record of achievement to this educational effort,” says ACFAS President Michael S. Lee, DPM. “I’m very pleased he accepted the challenge to lead the council in taking the College’s CPGs to the next level.”

The award will be presented in a ceremony on March 10 at the ACFAS Annual Scientific Conference in Fort Lauderdale, Fla. For a listing of past recipients and more, visit acfas.org/update. ■

2011 CME Calendar

Program brochures will be available in late March at acfas.org.

May 13–14, 2011 (Fri/Sat)

Practice Management Seminar
Embassy Suites
Cleveland, Ohio
14 continuing education contact hours

June 17–18, 2011 (Fri/Sat)

Arthroscopy of the Foot and Ankle Surgical Skills Course
Orthopaedic Learning Center (OLC)
Rosemont, Ill.
16 continuing education contact hours

Sept. 25–26, 2011 (Sun/Mon)

Arthroscopy of the Foot and Ankle Surgical Skills Course
Orthopaedic Learning Center (OLC)
Rosemont, Ill.
16 continuing education contact hours

Oct. 1–2, 2011 (Sat/Sun)

Sports Medicine Surgical Skills Course
Orthopaedic Learning Center (OLC)
Rosemont, Ill.
16 continuing education contact hours

Oct. 14–15, 2011 (Fri/Sat)

Practice Management Seminar
Hard Rock Hotel
Las Vegas, Nev.
14 continuing education contact hours

Oct. 27–30, 2011 (Thurs–Sun)

Complex Foot and Ankle Applications of Circular Frames
External Fixation Workshop
Scottsdale, Ariz.
20 continuing education contact hours

Nov. 4, 2011 (Friday)

Intensive Forefoot Arthrodesis Surgical Skills Course
Techniques and Technology
Jersey City, N.J.
8 continuing education contact hours

Nov. 5, 2011 (Saturday)

Intensive Rearfoot Arthrodesis Surgical Skills Course
Techniques and Technology
Jersey City, N.J.
8 continuing education contact hours

Dec. 10–11, 2011 (Sat/Sun)

Arthroscopy of the Foot and Ankle Surgical Skills Course
Orthopaedic Learning Center (OLC)
Rosemont, Ill.
16 continuing education contact hours

Bone and Joint Decade to Change Name, Maintain Goals

Since 2003, ACFAS has been a member of the U.S. Bone and Joint Decade (USBJD), the American arm of a global organization that set out nine years to unify the musculoskeletal community in raising awareness of musculoskeletal diseases. This effort has been so successful that, as the Decade reaches its tenth year, it has decided to continue its worldwide work beyond 2011.

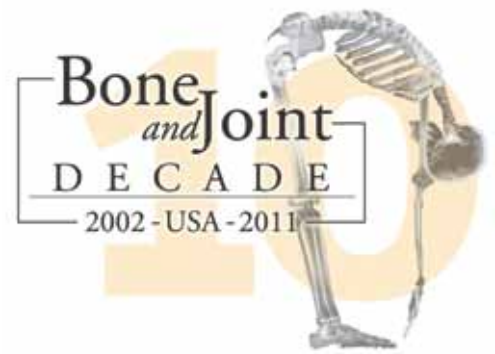
This year the U.S. Bone and Joint Decade will become the United States Bone and Joint Initiative, to reflect the continuation of its mission and the dynamism of its current organization.

Its goals remain the same: to promote and facilitate collaboration among the public, patients and organizations to improve bone and joint health through education, research and advocacy.

The primary focus of their continuing efforts will be on:

- Awareness and advocacy
- Access to high quality musculoskeletal care
- Data assessment and dissemination
- Interdisciplinary forums and programs

“We sincerely hope that we can count



on the American College of Foot and Ankle Surgeons' continued support,” says USBJD President Joshua Jacobs, M.D., “and that your members will continue to actively participate in these programs.”

For more information on their programs and activities, visit USBJD.org. ■



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AMA Health Professions Survey: Results You Should Know as Medical Staff

The American Medical Association recently released findings from its Allied Health Professionals Survey, designed to study how hospital medical staffs integrate and monitor the activities of “allied health professionals” with regard to patient care, safety, quality and ethical issues. The survey was conducted by the AMA’s Organized Medical Staff Section and the National Association of Medical Staff Service, with data collected from 439 NAMSS members from May through July 2010.

Highlights include:

- Podiatrists (83%), dentists (80%) and doctorate level counselors (59%) most likely to be licensed independent practitioners.
- Most non-physician health professionals are credentialed and privileged by the medical staff (99% of dentists and 98% of podiatrists).
- Dentists (88%) and podiatrists (86%) most likely to be members of the hospital medical staff, compared to other non-physician health professionals.
- Dentists and podiatrists have highest participation in medical staff meetings or committees, and most likely to qualify for medical staff officer or have voting rights.
- Less than 1% of podiatrists were credentialed outside of the medical staff.
- Podiatrists (89%), dentists (86%), and chiropractors (68%) integrated into the medical staff quality review process comparably to MDs and DOs.
- Dentists (89%), podiatrists (87%) and chiropractors (55%) have highest entitlement to due process under the medical staff bylaws.

For links to more background and results, visit acfas.org/update.

New Position Statements Proposed

The ACFAS Professional Relations Committee has prepared two position statements for approval by the Board of Directors:

- Eliminate Licensure Bifurcation for DPMs
- Fringe Treatments/Complementary and Alternative Medicine

If approved, the final statements will be published on acfas.org. ■

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“1,278 new patients!”

Robert J. Abrams, DPM, FACFAS, Newhall, CA

“962 new patients!”

Mitchell Waskin, DPM, FACFAS, Richmond, VA

2010 ACFAS Research Grant Awarded

The ACFAS EBM/Research Committee recently announced the 2010 ACFAS Clinical and Scientific Research Grant recipients. Lowell S. Weil, Jr., DPM, MBA, FACFAS; Lowell Scott Weil Sr., DPM, FACFAS; and Wenjay Sung, DPM, will receive a grant for the proposed study, “Prediction of Plantar Plate Injury by Magnetic Resonance Imaging with Correlation to Intra-Operative Findings.”

Other ACFAS-funded research projects in progress include:

2009 Emily A. Cook, DPM, AACFAS

Research title: “Does Ketorolac Delay Bone Healing and Improve Post-operative Pain? A Prospective Double-blind Placebo-controlled Randomized Clinical Trial”

Lawrence A. Ford, DPM, FACFAS, and Christy M. King, DPM

Research title: “Pre-operative and Post-operative Analysis of Plantar Pressures for Hallux Valgus Correction”

2008 Paul J. Kim, DPM, FACFAS

Research title: “Physiological Response to Surgical Microdebridement in Patients with Achilles Tendinopathy”

2007 Javier LaFontaine, DPM, FACFAS

Research title: “Levels of Endothelial Nitric Oxide Synthase and Calcitonin Gene Related Peptide in the Charcot Foot”

Status: Completed; manuscript submitted to the *Journal of Foot & Ankle Surgery (JFAS)*.

2006 Monica H. Schweinberger, DPM, AACFAS, and Thomas S. Roukis, DPM, PhD, FACFAS

Research title: “Bacterial Skin Contamination Prior to and After Surgical Preparation of the Foot, Ankle, and Lower Leg in Patient with Diabetes and Ulceration: A Prospective Controlled Therapeutic Study”

Status: Completed; read it in *JFAS* July 2010, pages 348–356.

2005 Meagan M. Jennings, DPM, FACFAS, and Jeffrey C. Christensen, DPM, FACFAS

Research title: “The Effects of Hallux Vagus Correction on Sub-second Metatarsal Pressure”

For links to more information on research resources and opportunities, visit acfas.org/update.

How Do You Develop a Research Question?

By Javier LaFontaine, DPM, FACFAS

The development of a good research question is one of the most important steps of good research. For the experienced researcher it is easier. For example, previous research studies can generate new questions. However, a new investigator

may not have this advantage. The new investigator can use sources such as knowledge of the literature, discussion with peers, and reviewing other studies to help stimulate new ideas.

A reasonable way to start is to per-

form a complete review of the medical literature in one particular topic. For instance, if an investigator wants to study the incidence of non-unions in the diabetic patients, he or she may need to begin with a broad topic such as “non-union in diabetic patients.” The investigator may find, for example, that there is a lot of literature on non-unions of the ankle, but not much evidence on metatarsal fractures. This will help the investigator determine areas that may warrant research within non-unions in diabetes. Then the investigator can use a medical literature search engine, such as PubMed, to narrow the search. Using different combinations of terminologies will help access the majority of articles published in the area.



Javier LaFontaine, DPM, FACFAS

Research Question Characteristics

“GOOD” RESEARCH QUESTION

Feasible

Adequate number of patients
Affordable
Investigator expertise

Interesting and relevant

To the investigator
To scientific knowledge,
future research directions

Novel

Confirms, refutes or provides new findings

Ethical

“NOT-SO-GOOD” RESEARCH QUESTION

Not feasible

Not enough subjects
Too expensive
Too broad a topic

Not interesting or relevant

Consult a mentor

Lack of skill of the investigator

Find skilled collaborators

Vague study plan

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Update

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The ACFAS vision is to serve society as the preeminent source of knowledge for foot and ankle surgery. Our mission is to advance the competency of our members and the care of our patients.



How Do You Develop a Research Question? continued from page 7

It is very difficult to be an expert in all areas of podiatric medicine and surgery. Mastery of a topic is accomplished by knowing the literature, networking with experts, and attending conferences in other venues.

Finding a mentor with research experience is very valuable, as he or she can assist you in developing a research question and converting it into a successful research. A mentor should be up-to-date in new technologies and provide information and ideas.

A good research question may also be generated from clinic patients. Critically observing patients' clinical presentation and how patients respond to treatment, and comparing results between patients, may spark ideas.

Teaching is another source of new ideas. Often, preparing presentations for lectures or grand rounds raises new research questions. Discussion with inquisitive residents and students can also stimulate creativity and questions. ■

What's New on the Web?

Mac users will be happy to learn that the member login at acfas.org is now working in Safari, as well as in Firefox. We appreciate your patience as we resolved this glitch.

What mobile devices are DPMs using? A recent analysis of mobile operating system use by visitors to acfas.org reveals this top five:

- iPhone (47%)
- iPad (22%)
- Android (18%)
- BlackBerry (7%)
- iPod (3.5%)

