



# ACFAS Update

VOLUME 20 ISSUE 6

NEWS from the AMERICAN COLLEGE OF FOOT AND ANKLE SURGEONS

## Customize Your EDUCATIONAL EXPERIENCE at ACFAS 2014



If you want an educational experience perfectly tailored to your interests and needs, you'll be highly pleased with the ACFAS 2014 Annual Scientific Conference, February 27 - March 2 in Orlando. Blending first-ever types of offerings with classic, top-flight instruction, the diverse program of ACFAS 2014 offers scores of options that will answer your burning questions, expand your knowledge and skills, and bolster your professional network.

The conference will give attendees more choices than ever before, enabling them to customize their mix of sessions to better target their needs. Just as important, ACFAS 2014 promises to round out the expertise of today's foot and ankle surgeon through a smorgasbord of topics, perspectives, and educational approaches.

*(continued on page 4)*



**Early Birds: Register Now for ACFAS 2014 Orlando and Save!**

Take advantage of Early Bird Rates and be among the first to register for the ACFAS Annual Scientific Conference February 27-March 2, 2014 at the Gaylord Palms Resort in Orlando and get Marriott Rewards Points.

To register, visit [acfas.org/Orlando](http://acfas.org/Orlando) and while online be sure to download the Program Guide to see the latest educational offerings and events planned for ACFAS 2014 and make your hotel reservations!

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perspective

## THE STANDARD IS THE STANDARD



Since the first podiatric residency program was founded, our profession's post-graduate training model has gone through significant and frequent changes. My family and I have witnessed its evolution ever since my grandfather started his practice in 1932 in Washington, Pennsylvania. Over the years, the Grossman Family (including my dad, uncle, and older brother) has devoted untold time and energy to the incredible progress of our profession and its residency programs, just as many of you have as well.

When I was a student at OCPM in the early 90s, I wondered why we were one of the few medical and surgical professions that did not have one standardized residency training curriculum. When I graduated, I can remember there being four or five different "types" of residency training models -- it was a virtual alphabet soup of post-graduate training programs.

The time after graduation is stressful for students, let alone the anxiety of having to decide on the type of training program to join -- a decision that will most likely define how you will practice for the next 30-35 years. Do we really know at that point of our careers what type of practice we want to build and foster? Have we really been exposed to all our profession has to offer to be able to make a decision so monumental as to dictate the spectrum of patients we will be able to treat?

I believe the fact that our profession now has one standardized post-graduate training model is an enormous achievement and moves us closer to parity with allopathic surgical specialties. I also believe that the 36-month training model is a perfect time frame to allow our residents to hone their cognitive, diagnostic and surgical skills in ALL aspects of this profession, including pertinent biomechanics. It is a sufficient amount of time for residents to participate in a meaningful research study and for them to learn the value of how insightful discussion leads to an unanswered question that can stimulate a well-designed research project.

There are those who feel two years is a sufficient amount of time to achieve all that is necessary to meet the standard, but I don't believe that's the right answer to solve the current (and hopefully temporary) residency shortage crisis. It certainly won't provide enough time to properly train a resident, but also, it would stop -- even back track -- podiatry's current momentum to full and unfettered professional parity.

Fast forward to 2021, when my niece, Leah Grossman, will be graduating from a podiatric medical college. Currently an undergraduate freshman in Pennsylvania, she has aspirations to continue the tradition her great-grandfather started. I recently talked to her about our profession and I asked her

what kind of practitioner she wanted to be. She told me she was unsure, but she did know she wanted to be trained so she could practice to her full potential. How insightful!

As a member of a large orthopaedic practice, I recently overheard one of my partners (who completed a five-year orthopaedic residency and is fellowship trained in his specialty) refer a patient to another surgeon for a procedure well within his surgical specialty. I asked him why he was referring the patient and he explained that the patient needed a procedure he wasn't comfortable performing. He made the conscious decision to practice within his surgical skills "comfort zone."

Despite the fact that all of our residents will graduate from 36-month podiatric surgical residency programs, I think each and every one of them will make these same decisions we did. They will determine which patients they feel most comfortable treating, they will discover their cognitive and psychomotor skill limitations, and then build their practices accordingly. But before that happens, they must be trained to the full extent of their potential and what their profession has to offer. We owe that to them -- and we owe that to our profession -- past, present, and future.

A handwritten signature in blue ink that reads "Jordan P. Grossman". The signature is fluid and cursive.

**Jordan P. Grossman, DPM, FACFAS**  
ACFAS President

Questions for Dr. Grossman? Write him at [president@acfes.org](mailto:president@acfes.org).

## JOIN NOW TO GET A MEMBER DISCOUNT

One of the many benefits ACFAS members enjoy is reduced rates to ACFAS educational offerings—the gold standard in CME. Courses are available regionally, as hands-on workshops, e-Learning through the ACFAS website, and at the ACFAS Annual Scientific Conference— and all have special rates available to members of the College.

Interested in joining? Visit [acfas.org/join](http://acfas.org/join) to access applications and requirements, or contact the College at [membership@acfas.org](mailto:membership@acfas.org) with questions or for more information.

## New e-Learning Podcasts

Download the latest free podcasts brought to you by the College and available in our new-and-improved e-Learning Center on [acfas.org](http://acfas.org). The topics released in November include:

- High-Risk Fractures
- Fellowship Specialties: Surgical, Sports-Focused and Research

To download these podcasts and others, visit [acfas.org/e-learning](http://acfas.org/e-learning) and click Podcasts.



## 2013 EDUCATION PROGRAMS

December 14-15, 2013 (Saturday/Sunday)

### Foot and Ankle Arthroscopy Surgical Skills Course\*

Orthopaedic Learning Center (OLC)  
Rosemont, IL

**SOLD OUT**

## 2014 EDUCATION PROGRAMS

February 26, 2014 (Wednesday)

### Perfecting Your Practice: Coding/Practice

Gaylord Palm Resort and Convention Center  
Orlando, FL

February 26, 2014 (Wednesday)

### Diabetic Deformity: Master Techniques in Reconstruction

Gaylord Palm Resort and Convention Center  
Orlando, FL

February 26, 2014 (Wednesday)

### Monday Morning Trauma: Advanced Reconstruction Techniques

Gaylord Palm Resort and Convention Center  
Orlando, FL

February 26, 2014 (Wednesday)

### Advanced Tendon Repair and Fixation

Gaylord Palm Resort and Convention Center  
Orlando, FL

February 27 - March 2, 2014 (Thursday-Sunday)

### 2014 Annual Scientific Conference

Gaylord Palm Resort and Convention Center  
Orlando, FL

April 25-26, 2014 (Friday/Saturday)

### Simple to Complex Forefoot Revisional Surgery Workshop & Seminar

ACFAS and Division 11  
Tysons Corner Marriott, Tysons Corner, VA

May 2-3, 2014 (Friday/Saturday)

### Simple to Complex Forefoot Revisional Surgery Workshop & Seminar

ACFAS and Division 1  
Manhattan Beach Marriott, Manhattan Beach, CA

\* To be wait listed please contact Maggie Hjelm at [Hjelm@acfas.org](mailto:Hjelm@acfas.org)

(continued from cover)

## CUSTOMIZE YOUR EDUCATIONAL EXPERIENCE AT ACFAS 2014

“In past conferences, we’ve had a big push toward evidence-based medicine and treatment guidelines, and while EBM is certainly important, it has its shortcomings, and there’s a critical place for experience as well,” says Thanh Dinh, DPM, FACFAS, ACFAS Scientific Conference committee chair. “As a result, ACFAS 2014 does a great job in striking a balance between experience and evidence-based medicine.”

### The Buzz About the “HUB”

Hailed as a fantastic merger of all practical things that pertain to foot and ankle surgery, the HUB — an interactive mini-forum in the exhibit hall — will make its debut at ACFAS 2014. The HUB consists of a small theatre that accommodates 35 people and encourages small group exchanges and face time with leaders in the field.

“This exciting new feature is perfect for when you want to take a break from all the academic information you’ve received in the larger venues and turn to a more intimate discussion on nonclinical and practice management topics for a while,” says Dinh.

Providing practical insights in a digestible format, the HUB will give attendees “bite-sized” education on a wide range of subjects.

A myriad of hour-long sessions will be showcased, addressing such topics as perfecting your bedside manner, improving your documentation, marketing your practice, understanding contracts, getting published, job hunting, improving your public speaking, and more.

### Cutting-Edge Clinical Topics

Expect to also get an edge in the clinical arena. For example, with total ankle replacement rapidly evolving and capturing greater member interest, it is fitting that ACFAS 2014 will shine the spotlight on this procedure in two separate two-hour panel discussions. “TAR—The Bare Essentials” will acquaint members with the basics of this procedure, while “TAR—The Not So Straightforward” will examine the latest developments from the frontline of science’s latest advancements.

Many other sessions will explore controversial issues and highly relevant concerns. As a small sampling: “One Small Step or One Giant Leap?” delves into the evidence as well as expert opinion regarding early weightbearing; “Forefoot Foibles” examines prevention and treatment of complications; “Not So Simple Ankle Fractures” looks at difficult surgical scenarios; “First Ray Controversies” debates the nuances of these common procedures; “Oh No—It’s Osteo” zeroes in on this challenging pathology; “Understanding Tendinopathy — Things that Work and Things that Don’t” reveals how to improve

patient outcomes; and “Everything You Wanted to Know about the Diabetic Foot, but Were Afraid to Ask,” probes areas where evidence and experience might conflict.

### Looking for More?

There’s more planned for ACFAS 2014, including the heralded new ACFAS Job Fair. You’ll also find a winning line-up of pre-conference sessions, esteemed cadaveric workshops, important research presentations, numerous programs for young members, and unmatched networking opportunities. For more information on ACFAS 2014, visit [acfas.org/Orlando](http://acfas.org/Orlando).



**Get the Early Bird Registration Rate and Save!**

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SCIENTIFIC CONFERENCE

# Imagine

EXPERIENCE MEETS OPPORTUNITY

## What's New on the Frontline of Research?

What's a sure way to put leading-edge research on your radar screen? Attend ACFAS 2014, and let a multitude of scientific manuscripts and posters keep you attuned to the latest investigations and novel insights.

Research is crucial to the advancement of medicine, and that's why so many attendees of past ACFAS conferences flock to these original research offerings. The numerous papers and posters slated for ACFAS 2014 have all been carefully selected to bring you up-to-the-minute findings from the vanguard of foot and ankle medicine.

## Three Sessions Spotlight Top Research Manuscripts

More than 30 manuscripts, each blindly peer-reviewed, will be examined at ACFAS 2014. The research spans a wide range of topics broadly categorized into wound care/Charcot reconstruction, foot and ankle trauma, and foot and ankle reconstruction.

In three separate sessions, authors each have a designated time to present their papers. This is followed by a brief review and commentary on the paper from a research expert, and then the research is opened to the audience for discussion.

"For the science-minded individual, these sessions are extremely attractive," says Mark Hardy, DPM, FACFAS, manuscript presentations chair. "You're catching information before it's even published—that means you're right on top of what's fresh and new in the world of foot and ankle medicine." In fact, these presentations are probably the precursors to what will be discussed in the lecture hall in the following year or two, notes Hardy.

The high-energy manuscript sessions have been conference highlights in past years, so be sure to come early. All attendees—from young members and residents to seasoned surgeons—will find the papers and discussions highly illuminating.

## A Plethora of Posters—and Innovative New Displays

Exciting new features for the scientific poster display will be added to the exhibit hall in 2014. With some 360 posters submitted this year and 250 accepted for presentation, conference planners will be launching innovative ways to deliver more posters and author discussions to attendees. The posters, which consist of either case study presentations or scientific format presentations, focus on a variety of topics of interest to all levels of foot and ankle surgeons.

"Attendees will want to explore the many interesting cases that will be presented," says Harry Schneider, DPM, FACFAS, poster exhibit chair. "Just a few examples include: Improvements in Total Ankle Replacement; The Podiatric Surgical Coordinator; Amniotic Membrane Uses; and Improvements in Fixation Constructs."

For the first time, scientific format posters will be displayed electronically as well as on paper at ACFAS 2014. Case studies will be presented on paper only. To give posters more exposure, 10 authors of a unique topic will present their poster on video and the presentations will be prominently displayed on large, wide-screen monitors in the exhibit hall and at registration. Electronic posters will be accessible at kiosks in the exhibit hall and on the ACFAS website after the conference. As always, poster authors will be available at various times to discuss their findings.

**With some 360 posters submitted this year and 250 accepted for presentation, conference planners will be launching innovative ways to deliver more posters and author discussions to attendees.**

## Take Advantage of All ACFAS 2014 Offers: Attend a Pre-Conference Workshop

Make the most of ACFAS 2014 and attend one of four first-class pre-conference workshops, covering both practice management topics and hands-on surgical sessions, set for Wednesday, February 26—one day before the full conference starts. Register today at [acfas.org/Orlando](http://acfas.org/Orlando) and choose the workshop best suited for you:

### Diabetic Deformity: Master Techniques in Reconstruction

Learn to effectively evaluate and manage diabetic patients with complex deformities while gaining knowledge and experience through the hands-on execution of procedures for complex deformities in this cadaveric workshop. ACFAS faculty will walk participants through risk stratification in limb salvage versus limb amputation and share experience in midfoot, rearfoot and ankle reconstruction as well as amputations.

**7:30am-Noon, 4 Continuing Education  
Contact Hours**

### Monday Morning Trauma: Advanced Reconstruction Techniques

Challenge yourself to learn the best approaches and techniques you can immediately use in your office to conquer the many traumas often seen after active weekends. Learn hands-on surgical techniques from skilled faculty who will inspire you to think strategically and efficiently while dealing with difficult cases that require tactical decision making.

**Noon-5pm, 4 Continuing Education  
Contact Hours**

### Advanced Tendon Repair and Fixation

This riveting surgery remains a top aspiration for many foot and ankle surgeons, and this cadaveric workshop will prove beneficial to those who attend. Participants will walk away with a refreshed energy for how to effectively evaluate and measure tendon ruptures and injuries, as well as an enlivened understanding of techniques you can use in this collaborative workshop. ACFAS faculty will offer a qualitative formative assessment, so you can complete this course with the confidence and skills necessary to begin using the techniques learned on your patients as soon as you're back in the office.

**7am-5pm, 8 Continuing Education Contact Hours**

### Perfecting Your Practice: Coding/Practice Management Workshop

Boasted as one of ACFAS' top courses, this interactive, comprehensive practice management workshop covers pertinent issues in surgical coding, modifiers, evaluation and management codes, and durable medical equipment. Gain a thorough overview of the essential concepts and skills required to manage today's medical practice and learn how to measure the indicators of a successful practice as a panel of foot and ankle surgeons discuss the "pros and cons" of various employment models.

**8am-5:30pm, 8 Continuing Education  
Contact Hours**

Register today at [acfas.org/Orlando](http://acfas.org/Orlando).



## JFAS Captures High Scores on Reader Survey



The College's flagship publication—the *Journal of Foot & Ankle Surgery (JFAS)*—once again ranked high in readership, reputation, and relevancy. Among other impressive results, the Journal's 2013 survey revealed that an astounding 100 percent of respondents read *JFAS*. Furthermore, *JFAS* still clearly holds the top position in providing the most trusted and respected content among nine publications in the profession.

Respondents gave *JFAS* high marks on several fronts, including publishing articles directly applicable to their specialty, keeping them abreast of important specialty-related developments, and publishing articles by recognized authorities. The 2013 survey

findings are similar to those from 2012, indicating that *JFAS* remains on track in meeting the needs of foot and ankle surgeons.

“My primary concern is that readers find that what is published in the Journal is meaningful to them in their practice,” says D. Scot Malay, DPM, MSCE, FACFAS. “We want to provide our readers with high-quality information they can put to use in the care of their patients.”

Highest-ranking content included “Tips, Quips and Pearls,” followed by original research reports, case reports and series, and instructional courses. “It’s gratifying to see that these received such high scores, and it shows us that our readers are not just interested in original research but also in interesting cases that clinicians come across in practice,” Malay says.

Reflecting growing interest and increased readership in the peer-reviewed *JFAS*, the number of submissions to the Journal continues to rise. Says Malay: “We’re currently averaging around one and a half to two submissions per day, and the Journal now reaches 7,000 readers worldwide.”

**“We want to provide our readers with high-quality information they can put to use in the care of their patients.”**

— D. Scot Malay, DPM, MSCE, FACFAS  
JFAS Editor

An advertisement for PhysicianWebPages.com. The top part features a doctor in a white coat and blue gloves holding a tablet. Text on the right says "Leader in Podiatric Web Sites" and "Web Site Design for your Medical Practice". A red badge says "COMPLETE SITES FROM \$1,195". Below the image, text reads: "PhysicianWebPages has been creating professional web sites for the medical community since 1999." followed by a bulleted list: "attract new patients", "educate your existing patients", and "make your staff more efficient". Below that, it says: "Our sites are clean, visually interesting, easy to navigate, and they convey the style and sense of professionalism that you need." The bottom section has the PhysicianWebPages logo and "Contact us TODAY! Free consultation to discuss your proposed web site project." At the very bottom, it lists "PhysicianWebPages.com" and the phone number "281.218.6286".

# The Five Steps to Take When a Claim Fails to Meet Medical Necessity

By **Jacqueline Reiss-Kravitz, CPC**  
**ACFAS Coding Coach**

Your claim is denied with a remark code as “failure to meet the medically necessary requirements.” What should you do?

First, understanding the definition of medical necessity is important. Payers refer to services, treatments, items or related activities which are necessary and appropriate based on medical evidence and standards of care as being “medically necessary.” They use evidence-based clinical standards of care.

Steps to take when a claim fails to meet medical necessity:

1. Ensure all information is correct and clear — free of computer data errors or typos.
2. Obtain plan information specific to this diagnosis, procedure, or service.
3. Become familiar with the payer’s appeal process — timely filing limits, means to communicate the appeal, who is the person reviewing the appeal.

4. Ensure the medical necessity guidelines for this service have not been recently updated.

5. Be prepared to prove through documentation the reason(s) this service IS medically necessary including a listing of previous and/or conservative treatments.

And as always, document the name of the employee with whom you spoke, including their title, the date, and time of the communication.

Further, when an insurance company indicates that a medical director has reviewed your claim prior to the denial, you should ask for the director’s credentials and specialty. Always request the appeal be reviewed by a different medical director and ask that he/she have a closely mirrored specialty to podiatric surgery. It can only benefit you in the end to have a peer review your appeal and documentation.



## Perfecting Your Practice Workshop February 26, 2014 Orlando

Learn more about insurance claim denials, surgical coding and how to measure the indicators of a successful practice at the full-day Perfecting Your Practice: Coding/Practice Management Pre-Conference Workshop at the Annual Scientific Conference in Orlando on Wednesday, February 26, 2014.

For more information or to register, visit [acfas.org/Orlando](http://acfas.org/Orlando).



## ACFAS Supports ACA Non-Discrimination Clause

Members of the College are encouraged to join in supporting the Coalition for Patients' Rights (CPR) efforts to uphold the non-discrimination clause of the Affordable Care Act (ACA). This particular clause ensures that services provided by a full range of health providers – not just MD/DOs – are covered by insurance plans, yet there is an effort among Congress members to have it repealed.

Legislation has been introduced, H.R. 2817, into the U.S. House of Representatives to repeal the non-discrimination clause of the

Patient Protection and Affordable Care Act (specifically Section 2706(a), Title XXVII of the Public Health Service Act). The non-discrimination clause protects patient access to quality, affordable healthcare by ensuring that services provided by a full range of health providers – not just MDs and DOs – are covered by insurance plans. This provision safeguards patient access to other types of qualified and licensed providers, who are indispensable caregivers to millions of Americans, particularly those in rural and medically underserved areas.

ACFAS is a member of the Coalition for Patient Rights and fully supports the ACA's non-discrimination clause. The CPR wrote a letter to Energy and Commerce Committee Chairman Fred Upton and Ranking Member Henry Waxman urging them to oppose H.R. 2817. View the letter at [acfas.org/federallegislation](http://acfas.org/federallegislation) explaining why we support the non-discrimination clause and oppose H.R. 2817.

## patient outreach



## Foot Health Facts Facebook Page Reaches Record

In the past month, the number of consumers following Foot Health Facts' Facebook page has nearly tripled due to a successful ad campaign. To date, over 2,010 (and counting) followers are now receiving daily foot and ankle health information in their Facebook newsfeeds, which is up from the old record of 724 followers. The increase in followers means more patients and potential patients as well as the media are learning about the College and its members and how we help our

patients. It builds awareness for the specialty and gives followers access to even more valuable information on our health information website, [FootHealthFacts.org](http://FootHealthFacts.org).

If you haven't already, follow Foot Health Facts on Facebook and share with your patients and colleagues. Help us keep ACFAS and the specialty at the forefront of people's minds when they need foot and ankle healthcare and information.



## 2014 Volunteer Leaders Sought

Help shape the advancement of the profession, the future of the College and, ultimately, the care of patients by volunteering for 2014 ACFAS committees. For information on becoming a committee volunteer, please visit [acfas.org/volunteer](http://acfas.org/volunteer). The deadline for applications is November 29, 2013.

## Fall Board Meeting Re-Cap

The ACFAS Board of Directors met for their Fall Board Meeting on October 26, 2013 in Rosemont, Illinois, near the College's headquarter offices. At the meeting, the Board took the following actions:

- Reviewed the College's investment portfolio and policies with the outside investment advisor.
- Elected Edwin Blitch, DPM, FACFAS, as recipient of the 2014 Distinguished Service Award, which will be presented during the Annual Scientific Conference on February 28.
- Approved a new position statement on Total Ankle Replacement privileging guidelines.
- Directed the Council on Journal Management to study ways to improve the Journal's Impact Factor even further.
- Raised the daily honorarium for volunteer travel time for the first time in 15 years, from \$175 to \$200 per day, effective January 1, 2014.
- Created a Board Development Task Force to enhance leadership development and recruitment.
- Directed the Professional Relations Committee to develop an action plan for outreach to complementary healthcare professions.
- Approved subjects and procedures for the new Clinical Consensus Statements via the Research-EBM Committee.
- Appointed Lawrence DiDomenico, DPM, FACFAS; and reappointed Larry Fallat, DPM, FACFAS, to the Council for Journal Management.
- Created an International Education Outreach Task Force.

The next Board of Directors meeting will be February 26, 2014, immediately prior to the Annual Scientific Conference, in Orlando, Florida. Please send any questions regarding these or other board issues to ACFAS Executive Director Chris Mahaffey at [Mahaffey@acfas.org](mailto:Mahaffey@acfas.org).



## 2014 Dues Reminders in Mail

It's that time of year again: dues reminders for the 2014 calendar year of membership have been mailed to all Associate and Fellow members. Dues can be paid online now at [acfas.org/paymydues](http://acfas.org/paymydues), or by mail or fax once your reminders arrive at your office or home. Payment is due by December 31, 2013.

Be sure to take advantage of all ACFAS has to offer, now and throughout the year. Visit the online ACFAS Member Center at [acfas.org/members](http://acfas.org/members) to learn more about the benefits your membership provides. College membership brings you in contact with the best and the brightest foot and ankle surgeons in the world. Here's to another great year of value in your membership!

## Board Nominees Announced



Laurence Rubin,  
DPM, FACFAS



John S. Steinberg,  
DPM, FACFAS



Byron Hutchinson,  
DPM, FACFAS



John T. Marcoux,  
DPM, FACFAS



Randal Wraalstad,  
DPM, FACFAS

After careful review and consideration of applicants to serve on the ACFAS Board of Directors, the Nominating Committee recommends these five Fellows for three positions in the upcoming electronic election:

- Laurence Rubin, DPM, FACFAS (Incumbent)
- John S. Steinberg, DPM, FACFAS (Incumbent)
- Byron Hutchinson, DPM, FACFAS
- John T. Marcoux, DPM, FACFAS
- Randal Wraalstad, DPM, FACFAS

Two, three-year terms and one, two-year term will be filled by election. Candidate profiles and position statements are posted on [acfas.org/nominations](http://acfas.org/nominations). The ballot order is prescribed in the bylaws. Eligible voters may cast one, two, or three votes on their ballot. Regular member classes eligible to vote are: Fellows, Associates, Emeritus (formerly Senior) and Life Members.

ACFAS will use electronic voting again this year from December 15, 2013 to January 14, 2014. All eligible voters will receive an e-mail with special ID information and a link to the election website no later than December 14. After logging in, members will first see the candidate biographies and position statements, followed by the actual ballot. Eligible voters without an e-mail address will receive paper instructions on how to log in to the election website and vote. There will be no paper ballots.

The 2013 Nominating Committee was Michelle L. Butterworth, DPM, FACFAS, Chair; Michael T. Ambroziak, DPM, FACFAS; Jordan P. Grossman, DPM, FACFAS; Jerome S. Noll, DPM, FACFAS; Gregory P. Still, DPM, FACFAS; James L. Thomas, DPM, FACFAS; and Eric G. Walter, DPM, FACFAS.

## Board of Directors Visit Scholl

The American College of Foot and Ankle Surgeons (ACFAS) Board of Directors visited the Scholl College of Podiatric Medicine during its fall Board meeting on October 25, in Chicago. The Board spoke to members of the ACFAS Student Club on work/life balance, attending top-notch residency programs, they presented a case study on open fractures and participated in an open question and answer session.

“The Scholl students and I would like to thank the ACFAS Board of Directors for a great visit. I have heard from students and faculty who were very impressed with the presentations and with the question and answer session. I know that I personally learned a lot from this visit, and as always, the ACFAS Board continues to motivate me for opportunities in my future,” said Scholl ACFAS Student Club President Blake Brannick.



Pictured from Left: Jillian Jadzak (ACFAS Student Club Secretary); Richard M. Derner, DPM, FACFAS, ACFAS Secretary-Treasurer; Matt Engelthaler (ACFAS Student Club Treasurer); Thomas S. Roukis, DPM, FACFAS, ACFAS President-Elect; Jordan P. Grossman, DPM, FACFAS, ACFAS President; Blake Brannick (ACFAS Student Club President); Michelle L. Butterworth, DPM, FACFAS, ACFAS Immediate Past President; Bryan Holand (ACFAS Student Club Vice President); Shawn Khademi (ACFAS Student Club Research Coordinator).



Board members Michelle Butterworth, DPM; Sean Grambart, DPM; and John Steinberg, DPM, presented case studies to Scholl students during the Board's recent visit.

## Thank You, 40-Year Members

A special note of appreciation and recognition goes out to the loyal and dedicated members who have been a part of the College for 40 years or more. For their commitment, ACFAS awards members with such length of service a Life Membership status. The ACFAS Board of Directors honors this year's recipients.



- Steven H. Glickman, DPM, FACFAS  
Troy, MI
- Patrick J. Grisafi, DPM, FACFAS  
Jamaica, NY
- J. Barry Johnson, DPM, FACFAS  
Winston Salem, NC
- Larry J. Kipp, DPM, MD, FACFAS  
New Port Richey, FL
- Robert G. Levine, DPM, FACFAS  
Louisville, KY
- Henry N. Merritt, Jr., DPM, FACFAS  
Fort Lauderdale, FL
- Paul R. Scherer, DPM, FACFAS  
Napa, CA
- Paul Schwarzentraub, DPM, FACFAS  
Lubbock, TX



**American College of  
Foot and Ankle Surgeons®**

*Proven leaders. Lifelong learners. Changing lives.*

## Market Your Practice: Show Your ACFAS Pride

Help grow your practice by promoting your ACFAS membership to your patients, colleagues, referring physicians and your potential patients by placing the ACFAS member logo and membership designation on your practice's marketing and communication items. All logos and usage guidelines can be found in the ACFAS Marketing Toolbox at [acfas.org/marketing](http://acfas.org/marketing).

### Use of ACFAS Member Logos

The ACFAS logo is provided to members for such uses as advertisements, practice information (brochures, website, etc.) and stationery. Use of the ACFAS logo must adhere to the following guidelines:

- In a group practice setting, the logo may be used on group materials (such as letterhead) only if all doctors in the group are ACFAS members, or if by its positioning it clearly indicates those doctors who are and are not ACFAS members.
- A group may not use the logo in advertising materials unless all of the individuals named in the ad are members, or if positioning of the logo in the ad clearly indicates which individual(s) is/are ACFAS members.

Logos are available in both full-color files and black-only files and are sized for use in print (high resolution) and on the web (lower resolution). To download, right-click the file name and choose Save As from the pop-up menu.

### ACFAS Designation Guidelines

As an ACFAS member you may also designate yourself to your patients, colleagues and the community as a Fellow Member or Associate Member of the College. When writing your name, you can display it accordingly:

#### Fellow Members

John Smith, DPM  
*Fellow, American College  
of Foot and Ankle Surgeons*  
or  
John Smith, DPM, FACFAS

#### Associate Members

John Smith, DPM  
*Associate, American College  
of Foot and Ankle Surgeons*  
or  
John Smith, DPM, AACFAS

If you have any questions on logo usage or designation, please contact ACFAS headquarters or view the guidelines at [acfas.org/marketing](http://acfas.org/marketing).



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