ACFAS 2020 REGISTRATION IS OPEN

Registration is officially open for the 2020 ACFAS Annual Scientific Conference in San Antonio. Register by December 12, 2019 to guarantee the lowest rates and be on your way to another ACFAS educational program you won’t want to miss. Here’s what’s in store for this year:

- Cutting-edge clinical sessions and hands-on surgical workshops
- Award-winning research presented in manuscripts
- 300+ scientific posters
- The HUB Theater
- Annual Job Fair
- Hands-on surgical workshops
- Unlimited opportunities to exchange ideas

WHAT’S THAT NOISE?

What should the public expect from a hospital credentialed foot and ankle surgeon? The Joint Commission (TJC) standards and/or Medicare Conditions of Participation (CoP) specify that evidence of license, competence, relevant training and ability to perform the procedures the privileges requested should form the basis or privilege delineation and the available clinical privileging in an acute or ambulatory setting should represent the scope of practice as defined by state law.

Our profession continues to evolve to serve the needs of our patients and ACFAS is committed to the post-graduate education of our American Board of Foot and Ankle Surgery (ABFAS) certified and qualified members and the advancement of our surgical specialty. In all professions, board certification provides a stamp of approval, allowing the public to recognize that a board-certified physician has met a rigorous set of standards with a demonstrated degree of competency. In our profession, the ABFAS certification distinction is especially important for public trust and allows for other medical providers a clear understanding of the training and competencies required to be a board-certified foot and ankle surgeon.

ABFAS has set forth a standardized process in which the board-certified foot and ankle surgeon possesses the surgical knowledge and skills required to effect appropriate patient outcomes. This heavily scrutinized process promotes patient confidence, allows for hospitals to understand and recognize competencies for privileging and provides the opportunity to highlight the surgical expertise of our profession for insurers. It is my belief that the proponents of any other alternative pathway is poised to “turn back the clock” on a profession and a sub-specialty after years of marching towards parity.

These aren’t just my musings but are in fact the backbone of ACFAS. In 1938, chiropody/podiatry was primarily focused on topical medicine, biomechanics, and other non-surgical treatments, but William J. Stickel, the then-executive secretary of the National Association of Chiropodists, called for the creation of a “qualifying surgical organization” to create measurable standards of competency for hospital privileging in foot surgery. Four years later, ACFAS was founded to do just that … and (long story short) in 1963 when ABFAS was created and picked up the baton it has been the surgical specialty that transformed this profession— to a point where 47 states now have ankle in their scope of practice acts, DPMs are fully integrated into hospitals, and professional parity is a reality. Additional proof are the many state statutes and hospital credentialing rules specifically mentioning ABFAS surgical certification. To believe otherwise is a false alternative.

Standardization of the education and training of podiatric surgeons has been instrumental in earning credibility towards parity with allopathic and osteopathic colleagues. The now uniform three-year post-graduate training curriculum ensures that all podiatric surgeons have been exposed to a comprehensive educational program, providing a strong foundation for further advanced training. However, not all residents will be, want to be, or should be surgeons—and those physicians have the option to pursue a separate certification process and an ability to have a very successful practice without ever stepping into an OR. There are equivalent examples in the allopathic/osteopathic medical world and successful contemporaries in the 20+ (all DPM) practice group that I belong. (continued on page 9)

Christopher L. Reeves, MS, DPM, FACFAS
ACFAS President

Questions for Dr. Reeves? Write him at president@acfas.org.
GET A JUMP ON ACFAS 2020 WITH PRE-CONFERENCE WORKSHOPS

Head to San Antonio early and add an extra day to your educational experience with ACFAS 2020 Pre-Conference Workshops! Take your pick from one of these three exceptional workshops being offered on Tuesday, February 18:

Coding and Billing for the Foot and Ankle Surgeon
7:30am–5:30pm
8 Continuing Education Contact Hours
This interactive workshop will cover pertinent issues related to properly coding surgical procedures and evaluation and management services. Learn how to code efficiently and effectively to see an immediate return on investment in your practice.

Diabetic Deformity: Master Techniques in Reconstruction (Cadaveric)
7am–Noon
4 Continuing Education Contact Hours
Navigate and manage challenging wounds and associated deformities complicating non-healing wounds in the diabetic patient. Get an overview on multiple amputation techniques and surgically managing conditions that contribute to Charcot arthropathy.

High Frequency Foot Surgery Techniques (Cadaveric)
Noon-5pm
4 Continuing Education Contact Hours
Get advanced review of high frequency techniques in an intimate setting with real-time discussion with faculty and fellow attendees. Gain understanding of fixation mechanics and learn how patient recovery and satisfaction varies based on procedure choice and technique.

Visit acfas.org/sanantonio to see a breakdown of each workshop schedule and to register for an extra day of learning in San Antonio!

*To be waitlisted for sold-out courses, contact Maggie Hjelm at hjelm@acfas.org.
BEHIND THE CURTAIN OF ACFAS 2020

How do you take new and trending content, tried and true foot and ankle surgical topics, submitted manuscripts and turn that into an educational program for the ACFAS Annual Scientific Conference? It takes a lot of planning, countless emails and phone calls, and a couple in-person meetings to get there. Program Committee Chair Alan Ng, DPM, FACFAS and Co-Chair Naohiro Shibuya, DPM, FACFAS offer a rare glimpse behind the curtain to see what the timeline and planning process looks like for ACFAS 2020.

END OF ACFAS 2019: PLANNING BEGINS

According to Dr. Ng, the program committee meets at the end of the program to discuss overall effectiveness, what worked and what didn’t, what topics should be covered next year, brainstorm what content would make the sessions more competitive, etc. This list gets compiled into a document for committee members to review after returning home to start developing tracks and cover the content map before their spring meeting.

Dr. Shibuya points out member feedback being another important factor in planning. “We review the feedback from the previous year’s conference and see what members want for the next year’s meeting. That’s why it’s so important to fill out evaluations and surveys!”

SPRING COMMITTEE MEETING & BEYOND

Dr. Ng states the goal of the spring meeting is to set up an outline and establish overall content and a theme for the meeting. After this meeting, much of the fine tuning and adjusting of tracks is done via conference call and email between the committee and co-chairs.

MEETING AT ACFAS HQ

It’s final draft time! Co-chairs meet to finalize the program and assign speakers to complete the schedule.

AFTER THE MEETING AT HQ

Speaker assignments are sent out and the speaker list and schedule are adjusted to fill in any holes in content or rearrange to make up for any speakers who aren’t willing or able to present.

A PROGRAM IS BORN

Once the speakers and schedule get a final review and seal of approval from the chair, after too many emails and phone calls to count according to Dr. Ng, the final program is complete!

It might seem easy to go over the content from last year and just recreate that, but there’s pressure each year to not only accommodate membership’s needs, but to make each meeting cutting-edge and competitive to maximize member experience. Dr. Ng agreed the hardest part about planning the program is making sure to include content members want and need, “We want to make sure we give our members the best and most up-to-date education meeting to the point that you can’t and won’t miss it.” Each member has a different reason they attend the meeting and that’s something considered by the committee according to co-chair Dr. Naohiro Shibuya. “The reason for attending the Annual Scientific Conference is different from member to member. Some use it to come up with new research questions, some come to learn current concepts in foot and ankle, some use it for board review, some want to improve surgical skills.”

No matter the reason, the committee aims to have something for everyone at this year’s Annual Scientific Conference!
WHAT TO WATCH FOR THIS YEAR

- Posters and manuscript sections are getting bigger and more competitive
- General session tracks are more interactive to encourage audience participation and keep speakers and experts on their feet
- More technology within the session to survey, fact check and entertain while learning on the spot
- The Recon Challenge, because as Dr. Ng says, “There’s nothing better than education and entertainment at the same time.”

Take Dr. Ng’s advice, “Come learn and improve your knowledge to give your patients the best care possible by staying up-to-date with everything involving foot and ankle surgery.” The committee admitted they learned a lot while planning this year’s conference and you’re guaranteed to learn a lot, too. Visit acfas.org/sanantonio for more information, to book your housing and register for ACFAS 2020.

“**We review the feedback from the previous year’s conference and see what members want for the next year’s meeting. That’s why it’s so important to fill out evaluations and surveys!”**

— Naohiro Shibuya, DPM, FACFAS, ACFAS 2020 Co-Chair

RESIDENTS’ DAY IS BACK

**RESIDENTS’ DAY**

**pre-conference PROGRAM**

**HENRY B. GONZALEZ CONVENTION CENTER**

**FEBRUARY 18, 2020 | SAN ANTONIO**

Resident’s Day was such a hit last year that we’re bringing it back for ACFAS 2020! Join us on Tuesday, February 18 in San Antonio for another must-attend workshop designed specifically for residents.

Spend the day with experienced foot and ankle surgeons to get the inside scoop on transitioning from residency. Hear about their experiences, their ups and downs, get real-world tips and tricks and straightforward advice on everything from job search and interview prep to practice types and managing difficult cases, participate in discussions and Q&A over lunch and network throughout the day. Residents in attendance will benefit from the courses offered this year and take some pearls back with them to use in their practice and future career. Here’s what to expect this year:

- Transition to Real World
- How and When You Should Start Looking for a Job
- My First and Worst Case: Hindsight is 20/20
- Don’t Let the Start Be the End: Facilitating the Process (Privileging, Insurance)
- Potential Employer: What Makes You Worth Hiring
- How to Prepare for an Interview
- Contracts: Accepted “Standards” for Contracts in Different Practice Settings
- From Bunionectomy to the Corner Office—My Journey

You won’t want to miss the chance to hear first-hand the individual journey of these seasoned surgeons and leaders of the profession. Visit acfas.org/sanantonio to register and see the full schedule.
Tackling Telemedicine: Best Practices for the Foot and Ankle Surgeon

Technology is a blessing and a curse as it touches—and even takes over—much of our day-to-day lives. You can do almost anything on your device, including ordering and having groceries delivered, hiring people to pack and move for you and something becoming more prevalent, you can now even have a doctor appointment. Telemedicine or telehealth are interchangeable terms for the remote delivery of healthcare services using technology. It’s not widely adopted yet by foot and ankle surgeons, but telemedicine is something that has slowly peaked in popularity and is gaining traction with patients and providers alike. Technology admittedly enhances many things, but with this new movement also comes the potential for error.

To fully understand telemedicine and the potential effect it could have on today’s physicians and medicine, PICA Manager of Risk Management, Linda McSmith, RN, CPHRM, LHRM offers insight into telemedicine, how foot and ankle surgeons can use it effectively and what to consider before making the telehealth transition.

Technology has made everything easier and with a continuing theme of instant gratification, everyone wants answers and action immediately, which is why this is becoming a popular way to see the doctor, but not everyone is on board with just yet. Some physicians are concerned that telemedicine takes away the human interaction. Linda explains, “Medical visits via telecom services take the human interaction out of the practice of medicine. However, physicians do recognize that the ability for patients to have access to appropriate and quality healthcare, in a timeline fashion, can sometimes outweigh the timely human interaction. The focus needs to be on the communication between the patient and the provider.” This gives those who don’t have the resources or means to travel to see a doctor the opportunity to keep their health as a priority.

The first step to maximizing the potential of telemedicine and how it can work for you and your practice is to figure out what specific services can be offered via telemedicine versus in-person visits. Linda points out, “Telemedicine is a great option for those who need diagnostic services, check-up appointments or advice from a doctor without making a physical trip to the office. This is also a beneficial option for those with little time to travel from home or work to a doctor’s office.”

Here are types of patient consultations for which telemedicine can be most effective:

- Initial consultation for a doctor to make a visual examination of an injury, deformity or other noticeable foot or ankle problem
- Follow-up appointment after surgery, wound care, ingrown toenail treatment, etc.
- Discussion with the foot and ankle surgeon about home care treatment or instructions
- Coordinated appointment with home health nurse, physical therapist, occupational therapist or another medical professional

“Telemedicine is a great option for those who need diagnostic services, check-up appointments or advice from a doctor without making a physical trip to the office.” – Linda McSmith, RN, CPHRM, LHRM
Linda also describes some disadvantages to adopting telemedicine as a health service option for patients. “The limited volume of patients who fall into the scope of care that the foot and ankle surgeon can offer via telemedicine may discourage them from participating in a telemedicine program. The provider may find that making changes in his or her schedule for telemedicine encounters is not providing a return on investment.” The cost and availability to get physicians set up on a platform enabling telehealth services may also be less than desirable. “The amount of time and resources of skilled clinical staff it would require to initially screen patients and upload the initial intake and history forms may not be congruent with the reimbursement.”

Think you’re ready to move forward with adopting a telemedicine plan for your practice? Linda provides certain things to check off your list before making the change. “Before beginning these services, be sure to notify your professional liability insurance carrier. Not all carriers are extending coverage for telemedicine services. Policy language needs to be reviewed to determine if there could be any gaps in coverage or if you will be providing services out of state.” Coverage can vary by state and among insurance companies and may not carry across state lines. “The location of the patient at the time of service, or their physical residence, may dictate in which state a liability claim may be filed and adjudicated.”

There’s also potential that doctors would need to be licensed in multiple states and based on the platform you use, and the distance indicated, patients may reside in a neighboring state. Documentation and patient safety are even more important as things can easily fall through the cracks when technology comes into play. Linda clarifies that there is still a potential liability involved with telemedicine. “Informed consent is an area that commonly presents in liability claims. The provider of the services has a duty to make patients aware of, and consent to, the potential benefits and risks associated with telemedicine, including delays that could result from deficiencies or failures of telecommunications, equipment and the potential for security breaches. Physicians should discuss the benefits and risks with patients before obtaining a signed consent form. Proof of informed consent should be documented in the patient’s record.” Practice protocols should be firmly outlined for all staff including licensed physicians and non-physicians who will be participating in the telemedicine program. The stricter and more transparent the process is, the less likely there is to be a grey area that could cause problems for the office or patient down the road.

Regardless of what side of this trend you find yourself on, the most important thing is to do your homework before making the plunge into telemedicine. Do your research, talk to your colleagues and see what resources are out there to help the transition. There are many processes to adopt and protocols to adhere to, but telemedicine is a great resource and has the potential to change the medical profession for the better.

### If you’re thinking of integrating telemedicine into your practice, here are some pros and cons for you to consider before moving forward.

<table>
<thead>
<tr>
<th>PROS</th>
<th>CONS</th>
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<tr>
<td>Convenient for patients with little time to make doctor appointments</td>
<td>Lose out on human interaction, which is important in a doctor/patient relationship</td>
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<tr>
<td>Good for follow-up appointments for post-op patients for which traveling may be difficult</td>
<td>Increased challenges arise with maintaining patient privacy and ensuring a secure portal in which to conduct telemedicine appointments</td>
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<tr>
<td>Convenient for doctors to see more patients without having to travel or bake in time for office delays or late appointments</td>
<td>Providers must continue to maintain compliance with HIPAA and HITECH requirements</td>
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<tr>
<td>Technology may be difficult for some patients to obtain or use</td>
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If you’re thinking of integrating telemedicine into your practice, here are some pros and cons for you to consider before moving forward.
news from the college

Seven Years & Going Strong — The ACFAS Job Fair

If you are looking for a new job or plan to expand your practice, make plans to attend the seventh annual ACFAS Job Fair at ACFAS 2020, February 19–21, 2020 in San Antonio, the fair is provided by ACFAS Benefit Partner PodiatryCareers.org.

Located in the Exhibit Hall, the Job Fair allows you to post your CV and open positions at ACFAS 2020 and to arrange onsite interviews with employers present at the conference. Take a moment to ensure your CV best represents all you have to offer and schedule one-on-one time with a professional CV reviewer. The reviewer will have appointments available for the first two days of the conference during Exhibit Hall hours and can provide sound advice on how to make your CV stand out from other candidates. Don’t delay as appointments fill up quickly!

A photographer and makeup artist will also be available to take free professional headshots for your CV and social media profiles.

If you can’t make it to San Antonio, don’t worry—all positions received before the conference will be posted in the PodiatryCareers.org booth and will be available online afterward at PodiatryCareers.org.
Recommended Board Candidates, Officers Announced

After careful consideration of applicants to serve on the 2020-21 Board of Directors, the Nominating Committee recommends the following four Fellows for three positions in the upcoming electronic election. The committee’s deliberations included written applications, volunteer histories, CVs, Open Payment data and telephone interviews.

- Christopher D. Lotufo, DPM, FACFAS
- Alan Ng, DPM, FACFAS
- Ryan T. Scott, DPM, FACFAS
- Matthew Williams, DPM, FACFAS

Online voting will be conducted December 6-22. Two, three-year terms and one, two-year term will be filled. Eligible voters may vote for one, two or three of the candidates. Candidate profiles and position statements will be posted at acfas.org/nominations by November 27.

2020–2021 Board Officers Elected

Also pursuant to the Bylaws, the Board of Directors have elected the 2020-21 officers who will also take office at ACFAS 2020 on February 19-22 in San Antonio.

Scott C. Nelson, DPM, FACFAS
President

Thanh Dinh, DPM, FACFAS
President-Elect

Michael Cornelison, DPM, FACFAS
Secretary-Treasurer

Christopher Reeves, DPM, FACFAS
Immediate Past President

President’s Perspective
WHAT’S THAT NOISE?
(continued from page 2)

ABFAS certification and qualification is codified and is the legally recognized standard for lower extremity surgical competency in state statutes, hospital regulations, and public awareness. It has been the solution to many state ankle scope battles. Any dilution of our competency would add more fuel to the complaint that our profession’s surgical certifications are confusing and would be irresponsible to the progress of our profession.

Doctors, we have come too far to “turn back the clock.” For 78 years this profession has scraped and fought for recognition, but the 1969 movement to a state-of-the-art surgical certification transformed our specialty. The long-held position of ACFAS is that the credentialing process for granting surgical privileges be uniformly applied to ALL surgeons seeking privileges, and that those “surgical” privileges should be represented by a standard set of criteria set forth by ABFAS.

I am proud to say that ACFAS members are the proven leaders of this standard and continue to change lives every day. We are the voice to quell the noise.
Another Option for Patient Education

You can now add Flatfoot in Children: Something to Worry About? to the list of available PowerPoint presentations in the ACFAS Marketing Toolbox. The newest presentation outlines different types of flatfoot, symptoms associated with flatfoot, diagnosis and treatment options and comes with a full script for you to use to present.

Use the presentation to educate patients about this common condition in kids whether in your office or in the community. Display it as a slideshow in your waiting room, post it on social media or present it with the accompanying script at a community health event.

Visit the Marketing Toolbox at acfas.org/marketing to access the full library of PowerPoints on some of the most common foot and ankle health topics along with many other freely available resources to promote your practice and educate patients.
Increase Your Practice Reach with Winter FootNotes

The year is winding down, but your practice marketing efforts don’t have to! The winter issue of FootNotes is now available in the ACFAS Marketing Toolbox to promote your practice and educate your patients.

Articles in this issue include
- Six Tips for Healthy Holiday Feet
- Keep Boot Heels Low This Winter to Prevent Foot & Ankle Injuries
- Keep Your Feet Safe at the Gym in the New Year

Customize the issue by adding your practice contact information to the blank space on the second page. Maximize your reach by distributing copies of FootNotes to patients, post the issue on your website and post to your social media accounts.

To download your issue, visit the Marketing Toolbox at acfas.org/marketing.

Reference Toe System®
1ST MTP Implant

Angled Metatarsal Stem Matches Natural Declination Angle
The Modern Silicone Toe
No Angled Cuts, Broachless Implantation

“...The modernization of the implant and instruments was well overdue and a huge advantage over older silastic implants. The instruments are simple, efficient and assure the best fit scenario while cutting my OR time in half.”

– Gary M. Lepow, DPM, MS, FACFAS, Houston, TX


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Residency directors, program faculty and deans — mark your calendars — the 2020 Residency Directors Forum is set for Tuesday, February 18, 2020 in advance of ACFAS 2020 in San Antonio. This year’s event will again be co-hosted by ACFAS and the Council of Teaching Hospitals (COTH).

Make this not-to-be-missed event your CPME and hospital requirement for faculty development. Attendees will earn 3.0 CME hours.

Session content will include discussions on choosing and teaching millennial residents; best practices dealing with negative reviews; at-risk residents; avoiding harassment claims; proper social media usage; CPME compliance; resident hours; and malpractice claims.

This is just a taste of the content to be presented at this year’s Forum. Watch your email for more event details and registration information or go to acfas.org/rdc.

Watch Your Mailbox for Your Dues Reminder

ACFAS mailed hardcopy membership dues reminders for the 2020 calendar year to all Fellow and Associate members. Pay your dues online at acfas.org/paymydues or by mail or fax once you receive your reminder. Payment is due by December 31, 2019.

Visit the ACFAS Member Center at acfas.org/members to learn more about all that ACFAS membership offers you.
Promoting Who You Are and What You Do — it’s what we here at the College do through our national public relations campaign, including our latest our latest Walk a Mile campaign. This campaign lays the ground work to market the great work you all do, but we need your help on a local level — grassroots efforts — to make those personal connections with local folks. Reaching people in your own area is easy with the help from the marketing tools we’ve developed for this campaign, all available online and in the ACFAS Marketing Toolbox. This Toolbox, a free resource designed specifically for members, is filled with marketing tools to help you educate patients and promote the profession at acfas.org/marketing.

As part of our Walk a Mile Campaign we’re using social media graphics and videos to showcase member surgeons who’ve helped to transform a patient’s life through treatment. Each patient has their own unique story on how different people from different walks of life overcame devastating injuries to live a better life with the help of their foot and ankle surgeon.

These graphics and videos can be found on ACFAS’ social media channels for sharing on your own social media pages and are also part of the ACFAS Marketing Toolbox for you to use in your own marketing efforts. Visit the Marketing Toolbox at acfas.org/marketing to access these free resources and many others so you can endorse your practice going forward.
Have you visited the new ACFAS Logo Store? ACFAS now makes it easier to show your pride in your professional accomplishments and the College with merchandise from the ACFAS Logo Store, your one-stop shop for ACFAS gear. The ACFAS Logo Store website was recently revised to provide a better member shopping experience with new menus, streamlined product colors and virtual images. Shop 24/7 online through acfas.org for shirts, jackets, pullovers and scrubs in a wide range of colors and sizes, drinkware, pens and other items perfect for even the pickiest person on your shopping list.

Visit the ACFAS Logo Store and create a new account to check out all the available products, make your purchases and provide payment.

Visit acfas.org/logostore today!
I use the ClearGuard LE™ System because the single portal clear cannula with a blocked endpoint provides safe and controlled soft tissue releases through a small single incision.

– Jonathan Blum, DPM, FACFAS, Orthopaedic Associates of Osceola, Kissimmee, FL

Update

Seven Years & Going Strong — The ACFAS Job Fair

Walk A Mile

SAVE THE DATE FOR 2020 RESIDENCY DIRECTORS FORUM