ACFAS 2015 in Phoenix will be here before you know it! Make time now to book your hotel room with ACFAS’ official housing partner, onPeak. Reservations are processed on a first-come, first-served basis, so sign up early to get your first choice of exclusive hotels. onPeak staff are also available to assist you with your accommodations to ensure your entire trip goes smoothly.

Visit acfas.org/phoenix for full details and to make your reservations today to get the lowest rates and most complimentary amenities at specially selected hotels for your stay in Phoenix. And if you have not already done so, be sure to register for ACFAS 2015 at acfas.org/phoenix. We look forward to seeing you in February!

*Note that onPeak is the only official housing company associated with ACFAS 2015. While other hotel resellers may contact you offering housing for your trip, they are not endorsed by or affiliated with the event. Beware that entering into financial agreements with other housing companies can have costly consequences.*

ACFAS 2015 Hotels
- Sheraton Phoenix Downtown Hotel (Headquarters Hotel): $229/night
- Renaissance Phoenix Downtown: $229/night
- Holiday Inn Express Hotel & Suites Phoenix Downtown: $199/night
- Hotel Palomar Phoenix: $235/night
- Springhill Suites Phoenix Downtown: $189/night
My seven-year-old daughter believes in unicorns. Complete, unwavering, without question belief. She has created myriad drawings in vivid colored markers proving it.

I, too, see things as either black or white and have little ability to appreciate, or frankly tolerate, the gray middle ground. I need hard facts when making a decision involving patient care. I need to ask pointed questions that result in answers supported by factual data (with a cause and effect) and progress through a rationale path from one point to the next. Once I have this information, I process it, determine if additional confirmatory testing would be worth the patient’s time and finances and then present a treatment plan involving the full spectrum of conservative and surgical cares. Emphasis is placed on the likelihood of each treatment reaching the patient’s desired outcome.

The most important question I ask new patients is, “What are your expectations from me for today’s visit?” I always prepare for new patients the same way. I review all available information provided in extreme detail looking for that “ah-ha” comment in their clinic notes, operative report or imaging studies. New patients with no information are my favorite because, as I have heard, “You can learn a lot from a good history and proper physical exam.”

For second opinions and similar consultations, it can take me an hour or an entire evening to review and summarize their information prior to their appointment. Although this time is not billable, the patients universally recognize these efforts, and patient satisfaction with my care usually hovers in the low-90th percentile (based on questionnaires my employer randomly sends following office visits).

I am very critical of my patient outcomes and will apologize for the conservative or surgical cares taking longer than expected to improve their problem or for not achieving their desired expectations fully. I frontload my conversations with patients so they understand the rationale for the care plan undertaken, as well as the most common risks, complications and expected recovery course. Informing patients in this manner takes time. Pamphlets, surrogate provider dialogue and “after visit summaries” will not suffice; it must be face-to-face time.

To do this properly, I have had to limit my practice to complex foot and ankle pathology since these problems are well suited for a 30-minute, face-to-face office visit compared with general foot and ankle pathology. My inability to differentiate the appropriate time that truly needs to be spent counseling a patient, for example, an ankle replacement versus a fifth toe arthroplasty, is completely a result of my black or white viewpoint. This has followed me from private practice, to federal government work and finally to hospital-based multispecialty salaried employment. Like a tiger, I have sharply defined stripes that cannot change.

For those in residency, fellowship or first few years of practice, do not be like me. Ask your mentors questions, attend practice management courses, keep an open mind and cater to what the patient (consumer) wants, not what is best or most convenient for you. Spend the appropriate amount of time needed to properly diagnose their problem and to develop a treatment care plan. For my contemporaries and mentors, maybe this is the place where we can share opinions, concerns and protocols via social media efforts or during local division or national educational venues the College offers. Unlike my daughter, I am not sure if unicorns exist. And maybe tigers can change their stripes. Right?

Thomas S. Roukis, DPM, PhD, FACFAS
Football Season a Perfect Time to Register for Foot & Ankle Trauma Course

With fall comes football, which means your practice will likely see an increase in traumatic foot and ankle injuries this season. Stay ahead of the game and register now for ACFAS’ surgical skills course, Trauma of the Foot and Ankle, November 8–9, 2014; Aurora, CO—just 15 minutes from Denver International Airport.

This hands-on course will give you a strategy for tackling fracture and soft tissue injuries, plus you’ll learn the latest surgical approaches, reduction techniques and fixation methods. You’ll also hear state-of-the-art treatment pathways through patient cases and watch play-by-play instructional videos prior to each exercise to boost your skills in the OR. You’ll also gain true hands-on experience as you work in the cadaver lab on specimens with simulated fractures.

The course includes dinner and fireside chat to share personal cases (bring radiographs of cases on a USB flash drive or CD) with faculty and your fellow attendees.

Get a head start on your foot and ankle trauma game plan—register today at acfas.org/skills.

For a full listing of upcoming educational opportunities, visit acfas.org/education.
To more accurately reflect the criteria and training for residencies in podiatric medicine and surgery, Core Levels 1 and 2 of the ACFAS position paper, *Credentialing of Podiatric Foot and Ankle Surgeons and Guidelines for Surgical Delineation of Privileges*, have been revised.

The Board of Directors approved the revisions at their July meeting to better represent the College’s credentialing position, which states that the credentialing processes for granting privileges for the specialty of foot and ankle surgery should be uniformly applied to all surgeons seeking foot and ankle surgery privileges, regardless of medical degree.

A full copy of this revised position statement, along with others, is available in the ACFAS Position Statement Library at acfas.org/positions.

### Board Approves Revised Credentialing & Privileging Position Paper

<table>
<thead>
<tr>
<th>CORE LEVEL 1 PRIVILEGES: FOOT AND ANKLE</th>
<th>CORE LEVEL 2 PRIVILEGES: RECONSTRUCTIVE REARFOOT, ANKLE AND RELATED LOWER EXTREMITIES STRUCTURES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Privileges to admit as qualified, evaluate, diagnose, provide consultation, order diagnostic studies and perform surgical and non-surgical procedures of the foot, ankle and lower leg meeting the standard of care.</td>
<td></td>
</tr>
<tr>
<td>1. Soft tissue procedures of the foot and ankle and lower leg, including incision and drainage; lesion and mass excision; ligament and tendon repair; adjunctive tendon lengthening of the related lower leg; skin grafts/flaps; and lower extremity nerve surgery.</td>
<td></td>
</tr>
<tr>
<td>2. Osseous procedures, including osteotomies of the foot; ostectomies of the foot and ankle; open and closed reduction of forefoot and midfoot fractures/dislocations; and osseous fusions of the forefoot and midfoot.</td>
<td></td>
</tr>
<tr>
<td>3. Amputations of portions of or all of the foot.</td>
<td></td>
</tr>
<tr>
<td>4. Extracorporeal shock wave therapy.</td>
<td></td>
</tr>
<tr>
<td>5. CO2 laser use.</td>
<td></td>
</tr>
<tr>
<td>Privileges to include performance of complex, rearfoot, ankle and related lower extremity structures using any method within the standard of care.</td>
<td></td>
</tr>
<tr>
<td>1. Fusion and osteotomy of the ankle, rearfoot and related structures.</td>
<td></td>
</tr>
<tr>
<td>2. Soft tissue coverage, repair and reconstruction (including tendon transfers) of the rearfoot, ankle and related structures.</td>
<td></td>
</tr>
<tr>
<td>4. Arthroscopy of the foot and ankle.</td>
<td></td>
</tr>
</tbody>
</table>
The Journal of Foot & Ankle Surgery (JFAS), the College’s top-rated source for the latest clinically focused articles on surgical and medical management of the foot and ankle, just achieved another milestone. JFAS’ journal impact factor (JIF) increased to 0.979—its highest ever!

The JIF is a measurement of a journal’s influence based on its citation frequency data. A journal’s impact factor varies with, among other characteristics, the number and type of articles published in each issue, but it is the industry standard for measuring a journal’s influence in its discourse community.

“Our section editors and peer reviewers also do a great job of handling a lot of material, far more than ever before in JFAS history” — D. Scot Malay, DPM, MSCE, FACFAS, JFAS editor

“JFAS Achieves Highest Journal Impact Factor Ever”

Since JFAS surveys consistently indicate that readers thoroughly read each issue and value the range and scope of material included, Dr. Malay says he and the editorial team will continue to gradually increase the amount and quality of articles published. “We always aim to meet our readers’ needs and to fulfill ACFAS’ goals for the journal,” he affirms.

For 2015, Dr. Malay and the JFAS editorial team plan to publish even more articles, although this could eventually work against any future JIF increases. “As the number of articles published increases, our JIF’s growth will likely be adversely influenced,” Dr. Malay predicts. “However, this is commonly observed when journals, such as JFAS, explore the limits of published volume over time.” Either way, the CJM Council and editorial team will continue to work hard to exceed readers’ expectations for the Journal.
Protecting your patients’ health information depends on accurate coding, efficient operations and compliance with regulatory requirements. How well you and your staff document patient information and translate facts into codes also determines your reimbursement for services provided to your patients. Are you doing all you can to ensure your staff is using best practice in these areas for optimal success?

Attend the 2014 Coding/Practice Management Workshop (October 24–25, 2014; Philadelphia) to make sure your practice has the competitive edge and the tools you need to effectively code and bill for evaluation and management services, surgical procedures, wound care and durable medical equipment. Also learn how to interpret common modifiers, obtain and attest to Meaningful Use requirements, appeal insurance denials, document and code using ICD-10-CM, and much more.

This workshop provides 12 CPME hours as well, so don’t miss out—visit acfas.org/practicemanagement to register today!

**Faculty**
Jacqueline Reiss-Kravitz, CPC
Joanne Byron, BSNH, ICDCT-CM
Jerome S. Noll, DPM, FACFAS

*Course content and faculty are subject to change.*

---

**In Memory**
Roger G. Byron, DPM, FACFAS
Rice Lake, WI
ABFAS Exam Takers: Get Your ACFAS Membership Started...and On Track

It’s the season for new beginnings! Fall is here, and ACFAS is happy to help commemorate your important career milestones with the completion of your American Board of Foot and Ankle Surgery certification exam. What’s next for your College membership after passing your recent exam?

**Passed Part 1 of the ABFAS Certification Exam in Summer 2014?**
If you’ve successfully completed the written portion, you’re on the road to Board Certification! Advertise your ABFAS status, and take advantage of the many educational resources ACFAS offers, by joining the College as an Associate Member. Once you join, you can list the credential “AACFAS” after your name. And to help you make the transition from resident to practitioner, ACFAS is waiving the application processing fee and dues for the rest of 2014.

**Passed Part 2 of the ABFAS Certification Exam in Summer 2014?**
Congratulations on your certification and on completing this important milestone in your career! Become recognized as a Fellow Member of ACFAS, which will allow you to list the esteemed “FACFAS” credential after your name. Once you’ve received your exam results from ABFAS, contact ACFAS to become part of the best: a Fellow Member of the American College of Foot and Ankle Surgeons. The sooner you apply, the more quickly you can enjoy all the benefits of membership. For questions or an application, contact membership@acfas.org.

In Need of a Job or Have One to Fill? Visit PodiatryCareers.org

With the high number of websites out there that help you advertise your open career opportunities, sometimes the answer to where to turn for the best ROI can be hard to find. PodiatryCareers.org is the official online career center of the American College of Foot and Ankle Surgeons (ACFAS) and offers members exceptional career and employment tools, including the ability to:

- Search and apply to the premier podiatry jobs across the nation.
- Target the most qualified candidates in the field and take advantage of ACFAS special member pricing when posting jobs.
- Sign up for Job Alerts and receive email notifications when a new job is posted that matches your criteria.

PodiatryCareers.org is available online throughout the year and will also once again host an in-person job fair at the 2015 Annual Scientific Conference in Phoenix. How can you take advantage of these valuable opportunities? Visit PodiatryCareers.org to see a listing of available positions, call (888) 884-8242 to post a job on the website to find your next candidate or stop by the job fair in Phoenix and post your resume—or open position—at the Annual Scientific Conference in February.
ACFAS Members in Focus

Joseph C. Stuto, DPM, FACFAS
Brooklyn, New York
Member Since: 1990

All in the Family: Bridging the Generations of Care

For Joseph C. Stuto, DPM, FACFAS, podiatry is definitely a family affair—two of his sons are completing their podiatric residency training while another son has just begun his first year of podiatric education. Coupled with his 25-plus years of practice, this exceptional situation has given Dr. Stuto a unique perspective on just how much foot and ankle surgery has changed over the years and across generations.

Throughout his career and as a witness to his sons’ podiatric pursuits, Dr. Stuto has seen his fair share of change. “The educational process and the residency year requirements have definitely changed,” says Dr. Stuto.

“Technological advancements have streamlined how we access and receive information; however, it can be challenging at times to determine technology’s role in evidence-based surgical and medical decision-making. While new technology can be costly, it has the potential to improve patient outcomes,” he notes. Yet, with these changes, Dr. Stuto maintains that some aspects of podiatry have remained the same, such as taking time with each patient and listening to patients’ needs.

The knowledge Dr. Stuto has acquired over the years by working with so many different patients and by treating a wide range of conditions will no doubt be of benefit to his sons, Joseph, Alan and Steven, once they start practicing full time. Also, having three sons pursuing podiatry has in turn helped Dr. Stuto become more open to new ideas, leading him to continue to attend several ACFAS education courses around the country to keep up with the latest trends.

Not only does Dr. Stuto oversee two practices in Brooklyn, support his sons’ education and make time for his own professional development through ACFAS, he also volunteers as an honorary NYPD police surgeon, which allows him to treat police officers with foot and ankle disorders. “Knowing I can help them get back to doing the work they love is very fulfilling,” he says.

In addition, Dr. Stuto trains resident physicians at two major teaching hospitals. “Teaching residents is so rewarding. It also helps me stay abreast of the latest techniques in foot and ankle surgery,” he explains.

Should his sons decide to join his practice, Dr. Stuto wants to have open lines of communication with them to maintain a healthy workplace dynamic. “The use of technology will aid in our communication, especially when discussing case situations,” says Dr. Stuto. “I will also explore other working family relationships in the podiatry field to learn new approaches to cultivating a healthy work environment,” he adds. Above all, Dr. Stuto says he will encourage each of his sons to “be passionate practitioners, to continue their education and to always seek out new medical or surgical information technology that can help improve patient outcomes.”

As a seasoned doctor, educator, volunteer and father of three soon-to-be DPMs, what advice does Dr. Stuto have for candidates preparing for board certification or for those considering a career in podiatry?
“Candidates for board certification should attend both online and classroom review courses, especially those that offer a structured study guide,” he advises. “And be sure to participate in study groups with fellow residents.”

Dr. Stuto says those considering a career in podiatry must be committed and passionate about the profession. “Spend time with a foot and ankle surgeon to determine if this is indeed the right field for you. Take it seriously because the road is long—four years of podiatric medical education followed by a three- to four-year residency and possible fellowship, totaling seven to nine years of post-graduate education. But this road will lead to lifelong learning, which can bring great joy and satisfaction,” he concludes.

While the podiatry profession has indeed changed from generation to generation, Dr. Stuto’s experience proves that sometimes the desire to help patients lead healthy, active lives truly runs in the family.

“Be passionate practitioners, continue your education and always seek out new medical or surgical information technology that can help improve patient outcomes.” — Joseph C. Stuto, DPM, FACFAS
patient outreach

Fall FootNotes
Now Available

Just in time for fall, the latest edition of ACFAS’ free FootNotes newsletter is available for download in the ACFAS Marketing Toolbox at acfas.org/marketing.

Fall 2014 FootNotes includes the following articles:

- Overdoing Sports Could Lead to Overuse Injuries for Kids
- Shopping Tips for Children’s Shoes
- Do Arches Really Fall?

Be sure to customize FootNotes with your practice’s contact information in the space provided. You can put copies of FootNotes in your waiting room, post the articles on your social media sites or company website and distribute copies at health fairs or speaking engagements.

While in the Marketing Toolbox, you can also take advantage of the many other marketing resources available to help grow your practice and attract new patients.

ICD-10
Is your practice ready?

We make it easy with Working Capital Lines of Credit

- To be prepared
- Account for delayed reimbursement
- To ensure uninterrupted business operations

Contact Norma Cantrell today at 630.276.5730 or 800.942.0158 x 5730
Smarter Websites for Smarter Practices

DEMO A WEBSITE FOR FREE
Call 877-898-4024 or visit www.Officite.com

WEBSITES | SEO & PPC | MOBILE RESPONSIVE DESIGN | REPUTATION MONITORING | SOCIAL MEDIA | PATIENT EDUCATION

ACFAS CORPORATE SPONSORS

Platinum Level
Wright Medical Technology, Inc.

Gold Level
Arthrex
PICA
Stryker
Tornier

Silver Level
Solana Surgical, LLC

Bronze Level
Amniox Medical
BME, Inc.
Biomet
Integra
Podiatry Foundation of Pittsburgh
Small Bone Innovations, Inc. – SBi

Pewter Level
CurveBeam
Metasurg

ACFAS.org | JFAS.org | FootHealthFacts.org | 773-693-9300

American College of Foot and Ankle Surgeons* Proven leaders. Lifelong learners. Changing lives.

www.acfas.org
in this issue

Member in Focus
page 8

Hotels for ACFAS 2015
page 1

Register Now
page 6