ACFAS DISCOVERS
the Warmth of Home
in San Antonio

More than 1,250 foot and ankle surgeons enjoyed the warm Texas hospitality in San Antonio at the 2012 ACFAS Annual Scientific Conference on March 1–4. The sunny and pleasant locale was the perfect backdrop for this milestone 70th annual conference where physicians gathered to gain the latest in foot and ankle knowledge as well as four days of congenial meeting, mingling, conversing and—most important—learning from their peers and industry leaders.

Keynote speaker Abraham Verghese, MD, MACP—who is Professor for the Theory and Practice of Medicine at the Stanford University School of Medicine, Senior Associate Chair of the Department of Internal Medicine, and best-selling author—imparted his impressive practical expertise, but then he went a step further. He beckoned attendees to remember what they love about their work, encouraging (continued on page 15)
As I travel home from San Antonio, I’m filled with positive energy—what a great conference! The sessions were top notch, attendance was record breaking, and the experience of my Presidential inauguration was awesome. I started to reflect on the topics presented and how they will help with my practice. I learned a few surgical pearls I am anxious to try and how to incorporate EBM into my treatment plans. Plus, I witnessed great panel discussions, which made me realize personal experience should remain part of the practice of medicine and surgery.

Then, I thought about our keynote speaker, Dr. Abraham Verghese, who focused on the patient-physician relationship. While I gained a wealth of knowledge from the conference, I realized that this presentation, which was neither academic nor surgical, had the greatest impact upon me. He really hit home and reminded me that our focus should be on the patient. It seems he stated the obvious, but think about a patient you saw today and ask, “Did I really focus on my patient and interact with, listen to and examine them as I should have?”

Emarrassingly, my answers were mostly no. How many times has a patient come in with typical heel pain and we’ve already made a diagnosis without really listening or examining them?

Verghese’s perspective became more eye-opening while at the hospital, not as a doctor but as a visitor. As I sat in the ICU next to my mother’s bed, I watched the interaction of the doctors and staff with her and I thought about Verghese’s lecture. He talked about today’s practice of medicine and how the purpose of hospital admission is to render the live 3D human into a 2D image. He stated medical rounds are now typically removed from the living patient and are centered around the “ipatient.” During his talk, I thought about how truthful his comments were, how guilty I was of this practice, and how unfortunate it is for our patients. Sitting in the ICU, I saw things through a more patient-oriented perspective and I feared my mother would become an ipatient.

I was amazed though to see that the staff understood that patient interaction and bedside exams are vital to care despite today’s idea of mainstream medicine and advancing technology. The staff was compassionate and took a hands-on approach. They asked “Is there anything you need or anything I can do for you?” before they left the room. What a simple question, but think about how you feel after being asked it.

As my mother’s health improved, she was transferred out of ICU and again I expected she will become an ipatient. I was fortunately wrong again—I witnessed the continuation of hands-on personal interaction. They listened to her, validated her, and most importantly examined her. This combination helped turn an awful event into a positive experience. By the time my mother went home, everyone there had gained her trust not by being the smartest but for being the most human. As a doctor, observing from a patient’s perspective, they also gained my respect and made me take a closer look at how I treat my own patients.

As a result, I’ve made changes to my practice. I take the CPR training motto, look, listen, and feel, and use it during my patient encounters—and it has made a huge difference! I first look and make eye contact with my patient, shake their hand, and ask them how they are doing. Next, I simply listen to their complaint; no computers—just human interaction. Then, I begin my physical exam and feel. Even if I am sure the diagnosis, I do a thorough exam to give them the attention they deserve. At the end of the visit, I ask if there is anything else I can do for them to ensure they’re satisfied.

In the age of EMR where computers and iPads are in our exam rooms, we’ve seemed to misplace our focus. As we enter information about our ipatient, let’s remember to look, listen, and feel. The real patient should be our focus and with whom we should be spending the majority of our time. Let’s concentrate on our live patient and the importance of personal interaction and physical contact and not get lost in the “ipatient.”

Michelle L. Butterworth, DPM, FACFAS
ACFAS President

Questions for Dr. Butterworth? Write her at president@acfas.org.
Go Online for ACFAS 2012 Materials and CME Confirmation

The 2012 Annual Scientific Conference provided attendees an abundance of technical and professional information and instruction. Online access to the handouts and PowerPoint presentations from the speakers who provided them are available right on the ACFAS website. Simply log in with your member or attendee number. Handouts are available exclusively to registrants of ACFAS 2012 and can be downloaded any time at acfas.org/sanantonio.

While on our site, click on the link from our home page to view and print your ACFAS 2012 attendance and CME hours. This quick and convenient online confirmation is only available through May 30, 2012, so you’ll want to complete the process before then. The ACFAS Education Department has sent all ACFAS 2012 attendees instructions for confirming your transcripts via email. If you did not receive your email, or if you have questions about the online CME records, contact ACFAS at 800-421-2237.

2012 EDUCATION PROGRAMS

June 1-2, 2012
Practice Management/Coding Workshop
Portland, OR

June 15-16, 2012
Foot and Ankle Arthroscopy
Rosemont, IL

August 11-12, 2012
Foot and Ankle Arthroscopy
Rosemont, IL

October 12-13, 2012
Practice Management/Coding Workshop
Arlington, VA

October 26-28, 2012
Diabetic Foot & Ankle Surgical Symposium (and Optional Skills Wet Lab)
Coconut Grove, FL (20 minutes from Miami)

November 2, 2012
Surgical Solutions for Complications of the Forefoot
Jersey City, NJ

November 3, 2012
Surgical Solutions for Complications of the Rearfoot and Ankle
Jersey City, NJ

November 10-11, 2012
Trauma of the Foot & Ankle
Rosemont, IL

December 15-16, 2012
Foot and Ankle Arthroscopy
Rosemont, IL

acfas.org/education

Information on 2012 Regional meeting dates coming soon.
Snapshots from the Annual Conference

MARCH 1–4, SAN ANTONIO

Keynote Speaker,
Dr. Abraham Verghese

Robust workshops offered
Hands-on experiences in surgical techniques
Snapshots from the Annual Conference
MARCH 1–4, SAN ANTONIO

Just a few

Michelle Butterworth, DPM, FACFAS, became the 61st President of the College

Many thanks to Merz Pharmaceuticals, for continuing their support of the future leaders in foot and ankle healthcare by providing scholarships for 18 students to attend the meeting in San Antonio.

Some of the 143 new Fellows admitted into ACFAS in 2011
Once World War II was over and the College’s foundations laid after having been founded in 1942, the American College of Foot Surgeons (ACFS) set forth to continue on its goal to build the College into the premier community for foot surgeons.

One of the first monumental accomplishments of the 1950s would prove to add strength to the College when the 1950 House of Delegates of the National Association of Chiropodists (NAC) resolved that by 1952 all surgical educators in schools and continuing education should be members of the ACFS. Postgraduate surgical programs began to be offered to ACFS members by Drs. Henri Du Vries, Douglas Mowbray, Lawrence Frost, and Robert Rutherford. This educational initiative led to the merger of the Surgical Chiropody Society of the West Coast, the American Society of Foot Surgeons (ASFS), with the College. The union strengthened the young organization, increasing surgical training, elevating the standards of foot surgery, and further stimulating the exchange of ideas nationally.

Drs. Lawrence Frost, O. E. Roggenkamp, Samuel Korman, Ned Pickett, Ralph Owens, and Earl Kaplan were presidents of the College in the 1950s. In 1953, Dr. Jack Kohl was elected “Secretary” (who handled much of the administrative duties), but it was soon realized that rotating this office was not practical. It was such a time consuming job that Dr. Kohl was persuaded to assume the administrative duties of Executive Secretary, a separate position from Secretary. This job evolved into today’s Executive Director position.

The first residency training program in foot surgery was established in 1956 at Civic Hospital in Detroit, Michigan, by Dr. Earl Kaplan, with assistance from Drs. Irvin Kanat and Sol Luft. Very popular postgraduate surgery courses were delivered at Civic Hospital and jointly sponsored by ACFS. Dr. Kaplan was committed to building the best possible surgical organization for podiatry and so, generously directed that all revenue generated from those original postgraduate courses at Civic Hospital be donated to the ACFS. With a situation of inexpensive membership fees, expanding member services, and a growing membership roster, the College’s fiscal solvency was challenged. This much needed financial assistance from Civic Hospital allowed the College to continue delivering services in demand.

In 1957, as the ACFS continued to search for sources of increased revenue, Dr. Ralph Fowler suggested that scientific meetings be held separately from the national organization’s annual convention. Agreement was reached with the NAC to continue having the ACFS annual business meeting at the time and place of the national convention but the first, separate winter meeting of the ACFS was planned for February 1958, at the Riviera Hotel in Las Vegas. Dr. Fowler was the Scientific Chairman. The same format was utilized when the ACFS Scientific Conclave was repeated at the same site in 1959. Subsequent plans were made to take the meeting to Havana, Cuba, but the beginnings of the Cuban Revolution detoured the third annual meeting to Mexico.

The College actively surveyed members then shared results about care issues, formulary, and fees schedules. By the end of the decade, four regional divisions existed: Southwestern, Eastern, Western, and Michigan Divisions. The divisions were active in surgical courses and creating interest in College membership.

In 1958, the College made a first attempt at publishing the ACFS Journal. Dr. Ned Pickett had two issues printed by the Huse Publishing Company, publishers of the Nebraska Medical Journal. The journals were distributed broadly to all members, interested chiropodists, many hospitals, all state medical journals, and to several specialty professional publications. Some of the material in these two ACFS journals was reprinted in other specialty publications. As Secretary, Dr. Kohl did his best to gather and select material of interest for the Journal but the College did not have the manpower to produce enough articles so Journal publication was sporadic. Dr. Du Vries published his classic text, Surgery of the Foot, in 1959. It was the first podiatric surgical textbook, an authoritative work 15 years in the making.

In a decade of advancement and firsts, the College gained strength and acknowledgement that helped put it in a position to continue its quest for the decades that were to come.
Give your patients the surgical information they need by supplementing your consultations with the latest patient education handouts from your trusted source, American College of Foot and Ankle Surgeons.

The College's latest peer-developed patient educational CD provides clear, concise handouts that walk patients through the before, during and after phases of numerous surgical procedures.

One CD with 11 surgical topic descriptions, including:
- Understanding Your Foot or Ankle Surgery
- Achilles Tendon Disorders
- Achilles Tendon Rupture
- Ankle Arthroscopy
- Bunion Surgery/Hallux Valgus Repair
- Chronic Ankle Instability
- Flatfoot Surgery
- Fracture Repair
- Hallux Limitus/Rigidus Surgery
- Hammertoe Surgery
- Tailor’s Bunion Surgery

Each topic highlights
- Risks and Benefits of Surgery
- Details on Preparing for Surgery
- Description of the Procedure and
- Post-Op Instructions

Plus, each handout can be tailored to your patients’ specific needs!

Order your Perioperative Patient Education Series on CD for only $95 at acfas.org/perioperativeCD or call 800-421-2237.
According to Eric Barp, DPM, FACFAS, working in a multi-specialty center offers the best of both worlds: a small-group atmosphere with all the advantages a large-group practice affords.

This assessment is gleaned from Barp’s nine years of multi-specialty experience at The Iowa Clinic—the largest physician-owned, multi-specialty group in central Iowa. Barp joined its Foot and Ankle Department after residency, hoping the multi-specialty atmosphere would provide ample professional variety and challenge. The choice was a solid match; Barp says he “can’t be happier” in his professional situation.

More than 115 physicians and healthcare providers practice at The Iowa Clinic’s two facilities, offering care in 35 specialties. There are five professional care centers and 35 diverse specialties, including Plastic Surgery, Orthotics & Prosthetics, Physical Therapy, Trauma Surgery, and Cardiology. Collaboration across specialties allows for the best inpatient diagnosis and treatment.

Practicing podiatric medicine in a multi-specialty setting of this size is similar in many ways to managing a solo or small practice. The Foot and Ankle Department is part of the Muscular Skeletal Department that includes podiatry, pain management, and orthopaedics. There are three board-certified surgeons (Barp included) specializing in treatment for neuromas, heel pain, sports injuries, fracture care, and more. The department also has 11 employees on staff.

Barp’s small 14-person group allows them to know each patient personally and surgeons consult each other on intriguing cases. He explains, “The size of our group allows for camaraderie, where we can bounce ideas off each other and help each other with difficult cases.”

In addition to retaining these small-practice advantages, being part of a multi-specialty group also offsets some of the challenges that come with owning a group. As part of The Iowa Clinic, Barp’s department receives administrative services that allow him to focus on patient care: “It’s great, because I don’t have to worry about the business aspects of the practice.” All advertising, promotions, and public relations are managed—and paid for—by The Iowa Clinic. Human resource needs are also covered, including the often difficult and time-consuming tasks of hiring and firing.

The community gained from the multi-specialty setting is another benefit Barp notes. He has served on The Iowa Clinic’s Board of Directors for the past four years, where he has developed significant relationships with physicians in the other specialties. Affiliation with The Iowa Clinic infuses Barp’s practice with a wider—and more enjoyable—array of cases, stretching his

“The size of our group allows for camaraderie, where we can bounce ideas off each other and help each other with difficult cases.”

— Eric Barp, DPM, FACFAS
perfecting your practice in portland

want the inside scoop on the latest trends in podiatric surgical coding and cpt policy? new in practice or ready to retire and need help planning for your future? need a better understanding of hipaa, icd-10 and fraud issues? seeking new model contract/employment resources?

join us in portland, oregon, june 1–2, 2012*, for acfas’ perfecting your practice, a two-day practice management/coding workshop for surgeons/physicians, business office managers, coding and payment staff, and practice managers. perfecting your practice uniquely provides expert legal tools and practice contract solutions presented by an attorney specializing in health law.

why should you make plans for portland?

1. gone are the superbills: start now to prepare for the icd-10. while delayed for medicare, private payers are moving forward with this historic change for medical billings and collections.

2. cms’ meaningful use ehr incentive programs: learn the latest about requirements and attestation. foot and ankle surgeons can earn up to $44,000 under medicare over 5 years.

3. claims rejections due to hipaa 5010: cms acknowledges issues, and your medicare administrative contractor (mac) can’t solve them all.

4. confusion with the new independent payment advisory board (ipab): learn what this really means for foot and ankle practices.

5. contracts—understand what you are signing: get guidance on signing group practice or hospital employment agreements and a checklist for selling a practice.

for those interested in pursuing work with a multi-specialty group, barp has this advice: “make sure you get into a good situation where you are treated as an equal and given all the opportunities you hope for.”

*if your schedule doesn’t permit you to join us in june, you could attend october 12–13, 2012, in arlington, virginia.
Posters Build Research Foundation

The ACFAS scientific poster competition is an educational resource that contributes to the future of scientific and clinical understanding in podiatric medicine (many of the researchers are experienced not just beginners). The 2012 display contained 212 posters, including seven student entries from schools of podiatric medicine.

The 2012 poster award winners are:

**CASE STUDY FORMAT**

**First Place**
*Near Total Calcanectomy with Rotation Flap Closure for Heel Decubitus Ulceration with Calcaneal Osteomyelitis*
Troy J. Boffeli, DPM, FACFAS
Rachel C. Collier, DPM

**Second Place**
*Talocalcaneal Middle Facet Coalition Resection with Interposition of a Particulated Juvenile Hyaline Cartilage Allograft*
Dyane E. Tower, DPM
Ryan W. Wood, DPM
Michael D. Vaardahl, DPM, FACFAS

**Third Place**
*Complications with Polyethylene Arthroereisis: Two Case Reports of STA-Peg Implants*
Jeffrey C. Christensen, DPM, FACFAS
Jeffrey T. Robertson, DPM
Thomas K. Lee, MD, PhD

**SCIENTIFIC FORMAT**

**First Place**
*The Use of Collagenase in the Treatment of Plantar Fibromas*
Adrienne M. O’Neill, DPM
Summer R. Weary, DPM
Leslie P. Niehaus, DPM

**Second Place**
*A Cadaveric Limb Analysis of Tendon Length Discrepancy of the Posterior Tibial Tendon Transfer Through the Interosseous Membrane*
Alexander Pappas, DPM
Kyle Haffner, DPM
Samuel S. Mendicino, DPM, FACFAS

**Third Place**
*Effect of Modified Lapidus Arthrodesis in Rearfoot Alignment: A Preliminary Study*
C. Keith McSpadden, DPM
Matthew R. Thomas, DPM
Robert W. Mendicino, DPM, FACFAS
Alan R. Catanzariti, DPM, FACFAS

**STUDENT CLUB**

**First Place**
*A Rare Incidence of a Fibrosarcoma in the Plantar Foot That Mirrored Fibromatosis: A Case Report*
New York College of Podiatric Medicine

**Second Place**
*Evaluation of Fixation Strength for an Austin Bunionectomy: A Comparison Between Kirschner Wire and Screw Fixation*
Ohio College of Podiatric Medicine

**Third Place**
*Management of Lower Extremity Shark Attack in Florida: A Case Study*
Barry University
A Note of Thanks

Thank you to the College members who volunteered their time as judges of the poster exhibit competition. Their many hours of judging and evaluation of the entries at the 2012 Annual Scientific Conference is deeply appreciated.

| Richard E. Baker, Jr., DPM, FACFAS | Darryl M. Haycock, DPM, FACFAS |
| Philip Basile, DPM, FACFAS | Vincent J. Hetherington, DPM, FACFAS |
| Ian H. Beiser, DPM, FACFAS | Byron J. Ho, DPM, FACFAS |
| Richard A. Bellacosa, DPM, FACFAS | Allen M. Jacobs, DPM, FACFAS |
| Nicholas J. Bevilacqua, DPM, FACFAS | Marc A. Kravette, DPM, FACFAS |
| Douglas K. Blacklidge, DPM, FACFAS | George T. Liu, DPM, FACFAS |
| Edwin L. Blitch, IV, DPM, FACFAS | John T. Marcoux, DPM, FACFAS |
| Georgeanne Botek, DPM, FACFAS | Jeffrey A. Marks, DPM, FACFAS |
| Stephen A. Brigido, DPM, FACFAS | Anoosh Moadab, DPM, FACFAS |
| Adam M. Budny, DPM, FACFAS | Vincent J. Muscarella, DPM, FACFAS |
| John E. Cade, DPM, FACFAS | Scott C. Nelson, DPM, FACFAS |
| Neil A. Campbell, DPM, FACFAS | Michael G. Palladino, DPM, FACFAS |
| David C. Cavallaro, DPM, FACFAS | Eugene M. Rosenthall, DPM, FACFAS |
| Michael J. Cornelson, DPM, FACFAS | Monica H. Schweinberger, DPM, FACFAS |
| Paul D. Dayton, DPM, MS, FACFAS | Timothy J. Sorensen, DPM, FACFAS |
| Robert J. Duggan, DPM, FACFAS | Douglas G. Stoker, DPM, FACFAS |
| Ronald D. Edelman, DPM, FACFAS | Walter W. Strash, DPM, FACFAS |
| Lawrence M. Fallat, DPM, FACFAS | Timothy A. Vogler, DPM, FACFAS |
| Jeffrey W. Fleischli, DPM, FACFAS | Steven M. Zavinsky, DPM, FACFAS |

“As the 2012 ACFAS posters demonstrated, continued examination of best diagnostic and treatment practices provides an engaging platform of education.”

— Thanh Dinh, DPM, FACFAS, 2012 Annual Scientific Conference Poster Chair
Manuscript Awards Showcase New Studies

First Place ($3,000)
Distraction Osteogenesis for Brachymetatarsia: Percutaneous Metatarsal Osteotomy with External Fixation—A Retrospective Study
Monique C. Gourdine-Shaw, DPM
Bradley M. Lamm, DPM, FACPAS
John E. Herzenberg, MD, FRCSC
J. George DeVries, DPM, AACFAS

Second Place ($2,500)
Quantitative Assessment of Osteoprogenitor Stem Cells in Bone Marrow Aspirate from the Iliac Crest, Tibia and Calcaneus
Christopher F. Hyer, DPM, FACPAS
Gregory C. Berlet, MD
Bradley W. Bussewitz, DPM, AACFAS
Thomas Hankins, CCP
Terrence M. Philbin, DO

Third Place ($1,500)
Incidence of Acute Deep Vein Thrombosis and Pulmonary Embolism, and Associated Risk Factors, in Foot and Ankle Trauma
Naohiro Shibuya, DPM, FACPAS
Colby H. Frost, DPM
Jason D. Campbell, DPM
Mathew L. Davis, MD
Daniel C. Jupiter, PhD

Honorable Mentions ($750)
The Medial Double Arthrodesis with Lateral Column Sparing & Arthrodiastasis: A Radiographic & Chart Review
Gregory C. Berlet, MD
Christopher F. Hyer, DPM, FACPAS
Ryan T. Scott, DPM
Melissa M. Galli, DPM

Tibiocalcaneal Arthrodesis Utilizing Femoral Head Allograft: A 5 Year Outcome Study
Jeremy J. Cook, DPM, MPH, FACPAS
Emily A. Cook, DPM, MPH, FACPAS
Philip Basile, DPM, FACPAS

Ankle Valgus After Hindfoot Arthrodesis: A Radiographic & Chart Comparison of the Medial Double and Triple Arthrodesis
Christopher F. Hyer, DPM, FACPAS
Melissa M. Galli, DPM
Ryan T. Scott, DPM
Bradly W. Bussewitz, DPM, AACFAS
Gregory C. Berlet, MD

Agreement Among Pathologists in Diagnosing Diabetic Foot Osteomyelitis with Bone Biopsy
Andrew J. Meyr, DPM, AACFAS
Salil Singh, DPM
Xinmin Zhang, MD
Natalya Khilko, MD
Abir Mukherjee, MD
Michael J. Sheridan, ScD
Jasvir S. Khurana, MD

Appreciation for Members
Sincere thanks to the members of the College who served as manuscript judges for giving so generously of their time and expertise in evaluating the submissions.

Eric A. Barp, DPM, FACPAS, Chair
Troy J. Boffeli, DPM, FACPAS
Paul D. Dayton, DPM, FACPAS
John L. Etcheverry, DPM, FACPAS
Paul J. Kim, DPM, FACPAS
Christopher D. Lotufo, DPM, FACPAS
Roya Mirmiran, DPM, FACPAS
Barry I. Rosenblum, DPM, FACPAS

The ACFAS Manuscript Awards of Excellence were established to foster research on the practice of podiatric medicine. Research performed today will help advance foot and ankle surgery and determine best practices for patient care.

Manuscripts submitted for consideration are blind-reviewed and judged on established criteria by the Manuscript Review Committee. Out of the 35 manuscripts submitted, the committee selected 18 manuscripts to be presented at the conference, as well as the top winners below.

The winners split $10,000 in award money generously funded by the Podiatry Foundation of Pittsburgh, and presented by Nicki L. Nigro, DPM, and Jeffrey S. Nigro, DPM, chair of the Foundation Scholarship Committee, during the ACFAS Honors and Awards Ceremony on March 2, 2012.
Submit Your Research Grant Application

Applications are now being accepted for the 2012 ACFAS Clinical and Scientific Research Grant. The ACFAS Clinical and Scientific Research Grant provides financial assistance to ACFAS members studying topics in the foot and ankle surgery arena that could otherwise not be funded. This research must be clinical or laboratory based, with clearly defined research goals meeting all the criteria for grant submission.

Criteria:
Projects capable of obtaining EBM Levels of Evidence 1, 2 or 3 will be given preference, but studies cadaveric, animal or bench-top in nature will also be considered.

Evidence-Based Medicine has been added to the grading process as a judging criteria on the Levels of Evidence for Primary Research chart.

Use of a scoring scale is encouraged, including the ACFAS Scoring Scale and its 2011 Validation.

At least one of the investigators must be a member of the ACFAS in good standing.

Quarterly status reports must be submitted to ACFAS; grant recipients not in compliance may be requested to refund award monies.

If your research involves human subjects, funded grantees will be expected to complete a course in Human Subjects Training prior to receiving funds. The ACFAS Research Committee has identified online, free courses from NIH/CITI.

Grant Award:
Up to $20,000 can be awarded. Half of the grant money is payable within four weeks following announcement/acceptance of the award, completion of or documentation of human subjects training and submission of receipts; the second half is payable upon completion of a publishable paper submitted to the Journal of Foot & Ankle Surgery.

Application Process:
All applications are due September 1, 2012. For all the details or to submit a grant application, visit acfas.org/grant.

ACFAS Congratulates Recent Published Grantees

Naohiro Shibuya, DPM, MS, FACFAS
Daniel Jupiter, Ph.D.
Javier La Fontaine, DPM, MS, FACFAS

2011 Research Title: Assessment of Risk Factors Associated with Symptomatic and Non-symptomatic Flatfoot Deformity

Wenjay Sung, DPM
Lowell Weil, Jr., DPM, FACFAS
Lowell Weil, Sr., DPM, FACFAS

2010 Research Title: Prediction of Plantar Plate Injury by Magnetic Resonance Imaging with Correlation to Intra-Operative Findings. The study assesses utilization of magnetic resonance imaging (MRI) in evaluating injury to the plantar plate and determining whether conventional magnetic resonance imaging is a reliable tool for diagnostic evaluation, referencing the surgical findings.
Highlights of the Spring Board Meeting

The ACFAS Board of Directors met the day prior to the 2012 Scientific Conference in San Antonio, Texas. Highlights of the meeting included:

- Welcoming newly-elected directors Kris DiNucci, DPM, FACFAS, and Christopher Hyer, DPM, FACFAS. The new Division President’s Council Chair, Randall Wraalstad, DPM, FACFAS, was also welcomed as an ex-officio member with vote. The Board also expressed its appreciation to retiring board members Michael Lee, DPM, FACFAS, Jerome Steck, DPM, FACFAS, and outgoing DPC Chair Kimberly Eickmeier, DPM, FACFAS.

- Discussed the evolution and trends of state-of-the-art Clinical Practice Guidelines with a consultant on CPGs. The board voted to rename currently available ACFAS guidelines since they no longer meet accepted CPG development criteria.

- Approved changes to the position statements on “History and Physicals Privileges for Foot and Ankle Surgeons” and “Guidelines for Institutional Privileging and Due Process Rights.”

- Approved policy changes on Board of Directors nominating procedures, conflict of interest discovery and transparency, and special status member dues waivers.

- Appointed the 2012-13 Board Committee on Conflicts of Interest: Glenn Weinraub, DPM, FACFAS, Chair; Richard Derner, DPM, FACFAS, Member; and Sean Grambart, DPM, FACFAS, Member.

- Discussed significant mal-med cases in foot surgery with outgoing PICA CEO Jerry Brant, DPM, and incoming CEO Ross Taubman, DPM.

- Gave guidance to staff on plans for the 2012 member and practice surveys, which are conducted every three years.

The board’s next meeting will be July 20-22 in Newport, Rhode Island. Questions about the board’s actions or future work may be directed to ACFAS executive director Chris Mahaffey, CAE, FASAE, at Mahaffey@acfas.org.
Noll receives 2012 Distinguished Service Award

Each year the ACFAS Board of Directors bestows an award to recognize long-term, behind-the-scenes volunteerism to the profession and the College. The 2012 recipient of the ACFAS Distinguished Service Award is Jerome S. Noll, DPM, FACFAS. The leadership and vision Noll has provided since joining the college in 1988 are many.

In presenting this award, ACFAS President Glenn M. Weinraub, DPM, FACFAS mentioned the essential role Noll played in developing a manual of division procedures and policies, financial accountability, and leadership expectations. After Jerry stepped off the board in 2010, Weinraub explained how Jerry “immediately launched a drive to collect nearly 70 years of scattered records and fading institutional memories. He facilitated and transcribed oral history sessions with the past presidents and last year presented the board with organized cases, one for each year, containing all of the College’s archives. This was a huge undertaking which will be used and appreciated for the next 70 plus years of this organization.”

Proper recordkeeping is important because, as Noll sees it, “an archive is the memory of the association, providing answers on the why and how of past decisions and actions.” The work began in 2007, when Noll took up the charge to retain invaluable ACFAS memories, preparing them for secure digital archival and ease of access by College members. Noll used principles developed by the Society of American Archivists to collect, select, preserve and make available historical and documentary records.

In addition to his archival work, he also assists those who access College records so they find—and understand—the same information he has so laboriously stored. It is because of this tireless work that the Board was pleased to present Noll with the Distinguished Service Award at a ceremony on March 2, 2012 at the ACFAS Annual Scientific Conference in San Antonio.
ACFAS DISCOVERS the Warmth of Home in San Antonio (continued from cover)

them to trust their instincts, follow their passion, and never lose sight of the vision that inspired them to the field in the first place. Dr. Verghese did more than present; He inspired.

This inspiration set the pace for the educational sessions to follow. Clinical workshops, lectures, debates, discussion forums and comparative panels covered hot topics in foot and ankle surgery. Panelists debated controversial subjects, speakers disclosed difficult cases with unsatisfactory outcomes, and prerecorded demonstrations showcased new techniques.

Based on the glowing conference feedback, Annual Scientific Conference Chairman Christopher Reeves, DPM, FACFAS, and his committee were successful in their quest to provide deeply relevant content presented in a variety of formats. Standout sessions included “Charcot Dilemmas,” “OCD of the Talus,” and “Dueling Techniques Videos.”

The warmth continued from incoming ACFAS President Michelle Butterworth, DPM, FACFAS. Dr. Butterworth shared with attendees why she is so comfortable as she begins her term as ACFAS President: “To me, home is not just a physical place where you live and reside with your family; home is a feeling of belonging, a feeling of community and camaraderie. It’s a place where one finds comfort and security. Home is a place where a group of people can work together to achieve a common goal. I have found all of these things in ACFAS, and it’s why I consider the College my home.” She invited all students, residents and Fellows who are striving for excellence in foot and ankle surgery to feel welcomed home by ACFAS.

Those who came to San Antonio found themselves at home with the College family. We thank you for your passion and excitement, which made our 2012 conference one of the best gatherings ever. Check out other conference highlights throughout this issue of Update. For those of you who missed us in San Antonio, make your plans now to join us in Las Vegas, Nevada, for the ACFAS 71st Annual Scientific Conference February 11-14, 2013. See you there!

“Home is a place where a group of people can work together to achieve a common goal. I have found all of these things in ACFAS, and it’s why I consider the College my home.”

— Michelle Butterworth, DPM, FACFAS, ACFAS President
GOT PRIVILEGING PROBLEMS?

The College’s new Credentialing and Privileging Advisors Team (CPAT) is ready to help! Eleven DPMs with first-hand experience in hospital privileging committees will offer advice and counsel on your particular issue. Just send an e-mail giving a brief description of your situation to credentialing@acfas.org. You’ll then hear from an advisor within a few days. Our advisors do not offer legal advice but could suggest when outside counsel might be necessary.

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ACFAS CALL for MANUSCRIPTS AND POSTERS 2013

Research is essential to the medical profession and ACFAS is at the forefront of research for foot and ankle surgeons. If you are involved in a study that would be beneficial to the profession, the Annual Conference Program Committee invites you to submit your manuscript or poster for consideration for presentation at the Annual Scientific Conference, Monday, February 11 – Thursday, February 14, 2013 in Las Vegas, NV.

MANUSCRIPT SUBMISSION DEADLINE: AUGUST 15, 2012

Winners of the ACFAS Manuscript Awards of Excellent divide $10,000 in prize money from a generous grant given to the ACFAS by the Podiatry Foundation of Pittsburgh.

To Submit your manuscript, log on to acfas.org. Detailed information regarding manuscript requirements and policies is printed in the “2013 Call for Manuscripts” and “Instructions for Authors Submitting a Manuscript.”

POSTER SUBMISSION DEADLINE: OCTOBER 15, 2012

Have a poster you want to submit? The poster submission deadline is October 15, 2012. To submit your entry, visit acfas.org for detailed information regarding poster requirements and policies. You can also view sample abstracts in the “2013 Poster Guidelines.”

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