



FROM THE BOARD ROOM *News from ABMSP*

WE EXIST TO PROTECT AND IMPROVE THE PODIATRIC HEALTH AND WELFARE OF THE PUBLIC.

Your Monthly News & Updates December 2017

President's Message

In recent newsletters I have mentioned our new certification for those who treat geriatric patients. We will be unveiling this new credential in January - if you'll be at the SAM show in Orlando or at the NYSPMA show in New York, please come to the ABMSP booth to learn more about this new certification.

We will be calling it *Certification in Lower Extremity Geriatric Medicine*.

However, this certification will not require an examination. Instead, we will ask you to submit a portfolio of your work history with geriatric patients, other credentials held, educational activities attended, published works, and case studies. The cost is \$75 to apply and \$125 to submit the materials for certification. It will be available "on demand;" whenever you are ready to apply. Current diplomates of ABMSP will be given until April to apply for this certification with a waiver of the \$75 application fee (the cost to certify will be \$125).

Please check our website, www.abmsp.org in early January for more information and a copy of the Handbook for Candidates. Or write to abmsp@abmsp.org to be put on a waiting list to obtain a copy of the Handbook when it is issued.

Earl R. Horowitz, DPM
President

THE OPPORTUNITY HAS ARRIVED!
A Needed Area of Concern in Podiatric Medicine
Earl R. Horowitz, DPM and Kenneth Rehm, DPM

The expected growth of the older population in the United States over the next 50 years will be unprecedented. The supply of healthcare workers will

not keep up with the burgeoning demand; translating to not only a virtual shortage but compromised care in very critical areas of health care delivery. Geriatric health concerns are one of these all-important areas.

Pertinent to this are some very relevant facts. Older adults are more likely than younger people to suffer from chronic illnesses such as cancer, heart disease and diabetes. About 84% of those age 65 and older suffer from at least one of these conditions, compared to 38% of those ages 20 to 44. In addition, notwithstanding the relative shortage of healthcare professionals as it stands now, older adults in the future will be more likely to require the services of health professionals as a result of increased numbers of injuries and illnesses related to greater physical vulnerability. (National Center for Health Workforce Analysis, Bureau of Health Professions, Health Resources and Services Administration, March 2006).

For example, as this population gets older they are more likely to fall and develop fractures. Furthermore, older adults have more limitations in terms of performing activities of daily living than younger people, due to greater rates of physical and cognitive disability. Almost 35% of adults age 65 and older have an activity limitation, compared to about 6% of those ages 18 to 44 [U.S. Department of Health and Human Services (USDHHS), 2003]. Moreover, **access to care will be more limited and there will be a diminishing pool of family caregivers coupled with higher costs for paid para-nursing and custodial services.**

What a scenario! And a perfect recipe for increased podiatric problems. There will be more orthopedic injuries, falls, diabetes and its complications, venous insufficiency and consequences associated with medication errors and cognitive disability, among a host of other gait and foot related pathologies.

The particular treatments and specific podiatric needs of seniors are certainly on the rise; and perceptive critical speculation reveals the demand for podiatric services has yet to see its peak. A reasonable question begs to be asked! Are we as a profession prepared for this onslaught?

Within this regretful state, however, is a huge opportunity for the **podiatric profession** and its practitioners. A sizable portion of the consequential problems is related to the pedal manifestations of these chronic conditions; and is a *call to action for motivated podiatrists!* A new paradigm of thought has to be advanced. Things that are normally part of the average podiatry practice, such as peripheral vascular testing, biomechanical analysis of musculoskeletal and balance issues, office based surgical procedures, routine foot care; etc. now has to be dealt with in a specific way that supports the needs of the elderly. A focus on maintaining independence and quality of life issues has to be emphasized, in addition to tackling the issues of home environments and social situations as they relate to foot health in the aging population. There is now an increasingly pressing need for extra training, recognition and certification for this specialized area of expertise. Who better to meet this need than the properly trained **podiatric physician and surgeon?**

The American Board of Multiple Specialties in podiatry invites motivated doctors to inquire about becoming Board Certified in Geriatric Podiatry. It isn't just routine care anymore; it is anything but routine! Let's support the rediscovering, rebranding and the nurturing of what **podiatric physicians and surgeons** do better than any other field. Let's take advantage of this opportunity and own this burgeoning field of podo-geriatrics! Apply beginning January 1st 2018 to become board certified in lower extremity geriatric medicine. Applications will be available at www.ABMSP.org. or by calling 888-852-1442.

Visit Our Website

Letter from the Editor

Dear Valued Diplomates:

All of our patients are adversely affected by provisions in health insurance plan contracts which dictate what a doctor may charge a plan enrollee for items of services not covered by the plan. We need Congress to pass Federal legislation eliminating insurance companies' practices of setting prices on procedures not compensated by plans.

Please contact your US Congressional Representatives to let them know to vote for legislation that would prohibit all Federally regulated health care plans from offering nominal payments for otherwise non-covered services in an effort to have such services considered covered. Our podiatric consumers are disadvantaged by the negative impact of non-covered services provisions on competition among entities in the health insurance industry and all would benefit from this effort.

Theodore L. Varoz, DPM
Editor

Distinguished Author Series
Caroline Tiglio, DPM, DABMSP
Chair

The ABMSP gratefully thanks all participants in our *Distinguished Author Series*. As guest contributors to our website, mobile app, and newsletter, their expertise and knowledge supports our mission to promote education to the podiatric and medical/health care communities and general public. We very much appreciate your time and articles.

If you wish to participate as one of our *Distinguished Authors* please send your contact information, photo and proposed article to: Dr. Caroline Tiglio, carolinetiglio@yahoo.com

Listed below are recent *Distinguished Authors* and their published

articles. These articles are available on our website at the following link: [Distinguished Author Series](#)

Extracorporeal Shockwave Therapy: The Dornier Epos Ultra -Level One Evidence

David Zuckerman, DPM

David is a podiatric surgery doctor who practices in Woodbury, NJ.

Vitamin D Deficiency

Matthew Regulski, D.P.M., C.M.E.T., F.A.P.W.C.A., F.A.P.W.H.

Matthew is a Director at the Ocean County Foot & Ankle Surgical Associates P.C.

Simple Anterior Talo-Fibular Ligament (ATFL) Diagnosis and Repair: a Brief Biscussion

Victor Quijano, DPM, PHD, Diplomat, American Board of Multiple Specialties in Podiatry (DABMSP)

A Gradual Approach To Correcting The Charcot Foot

Philip Wrotslavsky

Phillip is the owner and Director of the Advanced Foot and Ankle Center of San Diego

Medical Coding and Billing Guidelines For Health Services - The Importance of Documentation

Michael G. Warshaw, DPM, CPC, Diplomat, American Board of Multiple Specialties in Podiatry (DABMSP). Full-time practicing podiatrist and certified medical coder, specializing in forensic medical coding.

Real Economic Considerations in Today's Medical Environment

Michael Q. Davis

Michael is the Executive Director of the Pennsylvania Podiatric Medical Association

The Importance of the PODIATRIC Physician in the care of the Geriatric Patient and Fall Prevention

Kenneth B. Rehm, DPM, Diplomate American Board of Multiple Specialties in Podiatry (DABMSP), Board Certified in: Podiatric Surgery, Podiatric Medicine, Prevention and Treatment of Diabetic Foot Wounds & Shoe Therapy and Limb Preservation & Salvage. Ken is the Medical Director of the Diabetic Foot & Wound Treatment Centers, Inc. and CEO Dr Rehm Remedies.

Residents' Corner

Residents and students - your voice needs to be heard! The Board of Directors of

ABMSP has initiated a Resident and Student Corner on its website. We have all been where you are - "been there, done that, got the t-shirt." We want to hear concerns, compliments, and everything in between. We are also looking for student and resident cases to publish online and in our newsletter. Take the first step ABMSP is here for you.

Email: residents@abmsp.org

Victor Quijano, DPM
Chair, Residents Program

Share Your Stories!!

If you have an accomplishment to share, or if you know of another accomplished podiatrist, the ABMSP would love to hear about it. Please contact the ABMSP office with any accomplishments so we can recognize them in a future newsletter.

Contact: abmsp@abmsp.org

We hope all of our Diplomates and their families and staff have a wonderful holiday season and a joyous new year!

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