

AN OVERVIEW OF PODIATRIC MEDICINE

Podiatric Medicine is that profession of the health sciences concerned with the diagnosis and treatment of conditions affecting the human foot and ankle, and their governing and related structures, including the local manifestations of systemic conditions, by all appropriate systems and means.

-Adopted by the Membership of the American Podiatric Medical Association, 1991

Overview of Podiatric Medical Education

Podiatric medical education is based on the accepted principles of allopathic medicine. Doctors of podiatric medicine (DPMs) receive basic and clinical education and training comparable to that of allopathic and osteopathic doctors, including:

- four years of undergraduate education focusing on life sciences;
- four years of graduate medical education in one of the nine accredited podiatric medical colleges; and
- three years of postgraduate hospital-based residency training.

Council on Podiatric Medical Education

The Council on Podiatric Medical Education (CPME) is an autonomous accrediting agency for podiatric medical education. The Council on Higher Education Accreditation and the US Secretary of Education recognize CPME as the accrediting agency for first professional degree programs in podiatric medicine. Deriving its authority from the House of Delegates of the American Podiatric Medical Association, CPME is empowered to develop and adopt standards and policies as necessary for the implementation of all aspects of its accreditation, approval, and recognition purview.

For more information:

Council on Podiatric Medical Education: www.cpme.org

Colleges of Podiatric Medicine

Each of the accredited colleges offers the degree of Doctor of Podiatric Medicine (DPM). All accredited colleges of podiatric medicine are properly chartered and licensed to operate within the jurisdiction in which they are located, and all have appropriate authorization from state agencies to offer the degrees conferred. The degrees granted by accredited colleges of podiatric medicine are accepted by state licensing authorities in all 50 states, the District of Columbia, and Puerto Rico.

Accredited colleges of podiatric medicine are:

Barry University School of Podiatric Medicine, Miami Shores, FL
California School of Podiatric Medicine at Samuel Merritt University, Oakland, CA
Des Moines University College of Podiatric Medicine and Surgery, Des Moines, IA
Kent State University College of Podiatric Medicine, Independence, OH
Midwestern University Arizona School of Podiatric Medicine, Glendale, AZ
New York College of Podiatric Medicine, New York
Dr. William M. Scholl College of Podiatric Medicine at the Rosalind Franklin University of
Medicine and Science, North Chicago, IL
Temple University School of Podiatric Medicine, Philadelphia
Western University of Health Sciences College of Podiatric Medicine, Pomona, CA

For more information:

American Association of Colleges of Podiatric Medicine: www.aacpm.org

Education Pathways: Predoctoral Education and Prerequisites for Admission

To enter a college of podiatric medicine, students must first complete at least three years or 90 semester hours of college credit at an accredited institution of higher education. Most students have received a baccalaureate degree and/or graduate degree prior to admission into a college of podiatric medicine.

Prerequisites for admission to a college of podiatric medicine include completion of the undergraduate college's required coursework in the sciences and humanities and an acceptable grade point average. Additionally, all colleges of podiatric medicine accept the Medical College Admission Test.

Podiatric Medical College Curriculum and Comparison to Allopathic Education

According to the American Medical Association, "colleges of podiatric medicine offer a core curriculum similar to that in other schools of medicine."¹

Podiatric medical college is a four-year program with the first two years focused on the basic medical sciences and the second two years focused on clinical medical education. The first two years of education at podiatric medical colleges are devoted to classroom instruction in basic medical sciences including, but not limited to, gross and microscopic anatomy, biochemistry, pathology, microbiology, physiology, and pharmacology. During the third and fourth years, students engage in clinical education based in accredited hospitals, clinics, and private practice

¹ American Medical Association, "Health Care Careers Directory 2008-2009" 36th Ed (2008).

settings. During these third- and fourth-year rotations, students are afforded intense medical and surgical training related to the entire human body with emphasis on the lower extremity, and they learn how to take patient histories, perform routine physical examinations, interpret diagnostic tests and findings, and make differential diagnoses.

The significant difference between the educational models that are followed in training MDs and DPMs is that podiatric medical education begins to focus on the specialty area much earlier and in much greater depth and breadth. During the podiatric medical education process, the curriculum integrates basic medical sciences with clinical medical education with specific emphasis on the lower extremity.

With earlier exposure to the specialty occurring in the colleges of podiatric medicine, graduates are well prepared for the even more intensely focused clinical training provided in their subsequent podiatric residency programs.

Podiatric Medical Postdoctoral Training

During residency, podiatrists receive advanced training in general medicine and surgery and participate in clinical rotations in anesthesiology, internal medicine, pathology, radiology, emergency medicine, and orthopedic and general surgery as well as elective rotations. Throughout residency training, emphasis is placed on diagnosing and managing patients with lower extremity pathology.

Doctors of podiatric medicine receive advanced training in hospital-based residency programs. CPME has converted all Podiatric Medicine and Surgery-24 month and Podiatric Medicine and Surgery-36 month residency programs into three-year comprehensive Podiatric Medicine and Surgery Residency (PMSR) programs. All new residencies must meet the following PMSR requirements:

Patient Care Activity Requirements

<u>Case Activities</u>	<u>Minimum Activity Volume</u>
Podiatric clinic/office encounters	1000
Podiatric surgical cases	300
Trauma cases	50
Podopediatric cases	25
Biomechanical cases	75
Comprehensive medical histories and physical examinations	50

<u>Procedure Activities</u>	<u>Minimum Activity Volume</u>
First and second assistant procedures (total)	400
First assistant procedures, including:	
Digital	80
First ray	60
Other soft tissue foot surgery	45
Other osseous foot surgery	40
Reconstructive rearfoot/ankle (added credential only)	50

For more information:

Council on Podiatric Medical Education: www.cpme.org

National Testing

The National Board of Podiatric Medical Examiners (NBPME) is the national testing agency for podiatric medicine. NBPME examinations, also known as the American Podiatric Medical Licensing Examination (APMLE), are designed to measure the knowledge necessary to perform at the level of minimum competence as a newly licensed DPM.

The APMLE examinations include three parts: Part I and II examinations assess whether a candidate possesses the knowledge required to practice as a minimally competent entry-level podiatric physician, while Part III assesses whether a candidate's knowledge and clinical skills are adequate for safe practice. It should be noted that some states accept the United States Medical Licensing Examination (USMLE) for DPM licensure.

For more information:

National Board of Podiatric Medical Examiners: www.apmle.org

Specialty Board Certification

Board certification indicates that a podiatrist has demonstrated a cognitive knowledge of a special area of practice. CPME, through the Joint Committee on the Recognition of Specialty Boards (JCRSB), is responsible for monitoring specialty certifying boards in podiatric medicine. JCRSB recognition of certifying boards in podiatric medicine is analogous to the role played by the American Board of Medical Specialties in its recognition of more than 20 specialty boards in allopathic medicine.

CPME currently recognizes two certifying boards: the American Board of Podiatric Medicine (ABPM) and the American Board of Podiatric Surgery (ABPS).

For a candidate to be eligible to sit for ABPM board certification, he or she must complete a CPME-approved residency. Passing the ABPM qualification examination is a mandatory precursor to the certification process. Board qualification lasts for five years. Candidates with 36 months of appropriate residency training are eligible to sit for the ABPM certification examination without submission of case documentation. Candidates with a minimum of 24 months of appropriate residency training must successfully pass the case documentation review process. This process entails submission of a list of 48 individual cases in a minimum of 14 different categories in podiatric orthopedics and primary podiatric medicine. Upon achieving board certification, diplomates must enroll in the ABPM Maintenance of Certification process. Hospitals and third-party payers nationwide annually verify the diplomate's board certified status and use the ABPM for primary source verification to meet their credentialing requirements.

Candidates for ABPS board certification must complete a CPME-approved residency program encompassing Foot Surgery and/or Reconstructive Rearfoot/Ankle Surgery. Candidates must pass Parts I and II of the ABPS certification examinations (Foot Surgery or Reconstructive Rearfoot/Ankle Surgery) to achieve board certification. Candidates successfully completing the Part I examinations receive Board Qualified status, which lasts for seven years. Successful completion of the Part I and Part II Foot Surgery Certification Examinations is a prerequisite for certification in Reconstructive Rearfoot/Ankle Surgery. Board certification must be renewed every 10 years. Hospitals and third-party payers verify the credentials of ABPS board-certified and board-qualified physicians. These organizations use ABPS for primary source verification to meet their credentialing requirements.

For more information:

American Board of Podiatric Medicine: www.abpmed.org

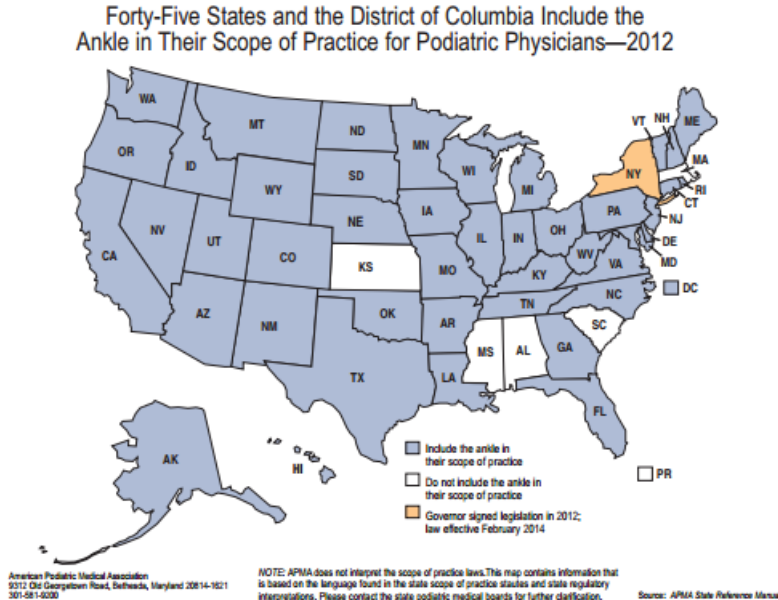
American Board of Podiatric Surgery: www.abps.org

Podiatric Scope of Practice and Licensure

Scope of Practice

Doctors of podiatric medicine are authorized to practice podiatric medicine by state statute and are regulated and licensed to practice podiatric medicine in all 50 states and the District of Columbia. Although the podiatric scope of practice statute varies from state to state, all states permit treatment of the human foot, while 45 states and the District of Columbia also permit treatment at or above the ankle.

Podiatrists are defined as physicians by the federal government and in most states. In the few states that do not use the term “physician” in the definition, podiatrists are licensed to diagnose and treat the foot, ankle, and lower extremity.



Podiatric Medical Licensure

Similar to other health-care providers, DPMs must be licensed to practice in a particular jurisdiction. Podiatric medical licensure is governed by state statutes and regulated by the podiatric medical licensing board or by the state medical licensing board when there is no separate entity regulating the practice of podiatric medicine. Minimum requirements for licensure in all states include graduation from an accredited college of podiatric medicine, a CPME-approved residency or preceptorship, and passage of some or all parts of the APMLE examination. A number of states require that candidates also pass a state exam.

For more information:

Federation of Podiatric Medical Boards: www.fpmb.org