



OHIO PODIATRIC MEDICAL ASSOCIATION, DBA
OHIO FOOT AND ANKLE MEDICAL ASSOCIATION
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To: State Medical Board of Ohio
From: Adam Thomas, DPM, President, Ohio Foot and Ankle Medical Association
Date: November 3, 2023
Re: Podiatry Rules

The Ohio Foot and Ankle Medical Association (OHFAMA) appreciates the opportunity to provide input to the State Medical Board of Ohio (the Board) on two rules in Ohio Administrative Code (OAC) that govern the practice of podiatric medicine and surgery in Ohio.

Founded in 1915, OHFAMA is dedicated to serving and protecting the public's foot health and protecting, promoting, and advancing the professional practice of podiatric medicine and surgery in Ohio.

On behalf of the over 600 podiatric physicians and surgeons who compose OHFAMA, we respectfully encourage the Board to make no changes to Rule 4731-20-01, OAC, or Rule 4731-20-02, OAC.

Ohio Law Relating to Podiatric Physicians and Surgeons

Ohio Revised Code (ORC) and Ohio Administrative Code (OAC) have long recognized podiatric physicians and surgeons are uniquely qualified among medical professionals to diagnose and treat the foot, ankle, and related structures in the lower leg due to the depth and breadth of their education and training.

Chapter 4731, ORC, defines (in part) the practice of podiatric medicine and surgery as consisting of the “medical, mechanical, and surgical treatment of ailments of the foot, the muscles and tendons of the leg governing the functions of the foot; and superficial lesions of the hand other than those associated with trauma.”

The Board, using rulemaking authority granted to it by the Ohio General Assembly, created Rule 4731-20-01, OAC, which defines “foot” as follows:

“Foot,” as used in section 4731.51 of ORC, means the terminal appendage of the lower extremity, and includes the ankle joint which consists of the tibial plafond, its posterolateral border (posterior malleolus), the medial malleolus, distal fibula (lateral malleolus) and the talus.

The Board further promulgated Rule 4731-20-02, OAC, to formally empower podiatrists to perform surgery on the ankle joint provided they hold privileges from a college of podiatric medicine, hospital, or ambulatory surgical center and can demonstrate adequate education, training, and experience needed to conform to minimal standards of care of similar practitioners.

Both Rule 4731-20-01, OAC, and Rule 4731-20-02, OAC, have been in place since 1997.

Podiatric Education and Training

Doctors of Podiatric Medicine receive medical education and training comparable to our allopathic and osteopathic colleagues, including four years of undergraduate education, four years of graduate education at one of eleven accredited podiatric medical colleges, and three years of hospital-based residency training.

During residency, podiatrists receive advanced training in podiatric medicine and surgery and serve clinical rotations in medical imaging, pathology, internal medicine and/or family practice, medical subspecialties, infectious disease, general surgery, surgical subspecialties, anesthesiology, and emergency medicine.

Throughout the course of their training, podiatric residents have substantial involvement in more than 1,000 foot and ankle surgical procedures performed on more than 600 patients. All residency programs, which are accredited by the Council of

Podiatric Medical Education (CPME), provide training resources that facilitate the resident's sequential and progressive achievement of demonstrated competency in general medical and surgical management.

Following completion of a CPME-approved residency program, many podiatric physicians and surgeons seek Board Qualification in Foot Surgery or Reconstructive Rearfoot/Ankle Surgery from the American Board of Foot and Ankle Surgery (ABFAS). Board Qualified status, which involves extensive didactic and clinical testing, indicates a demonstrated level of capability in the diagnosis of general medical problems, including the diagnosis and surgical management of pathologic foot and ankle conditions, deformities, and/or trauma and of structures that affect the foot, ankle, and leg.

Rule 4731-20-02, OAC, requires Ohio podiatric physicians and surgeons to complete a CPME-approved residency and attain Board Qualified status from ABFAS to perform surgery on the ankle joint.

Summary

OHFAMA considers the Board a valuable partner in protecting the safety of patients we are honored to serve. Throughout the years, the Board has been judicious and fair in using the statutory, administrative, and regulatory authority granted to it by the Ohio General Assembly to determine the scope of practice for podiatrists.

Rule 4731-20-01, OAC, and Rule 4731-20-02, OAC, provide clear direction to podiatric physicians and surgeons and protect and enhance the health and safety of Ohioans. Thus, OHFAMA requests the Board make no changes to the rules at this time.

Thank you again for the opportunity to share our perspective on rules that impact Ohio podiatric physicians and surgeons and the patients we serve. Please contact OHFAMA Executive Director Mike Mathy, CAE, at 614.457.6269 or via email at mmathy@ohfama.org should you have any questions.