



Podiatric “Physicians and Surgeons”

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Last year the California Medical Association (CMA), the California Orthopaedic Association (COA), and the California Podiatric Medical Association (CPMA) announced a joint task force to review podiatric training. The stated objective was “to begin the process of reviewing the education, curriculum and training of California’s podiatric medical schools, with the ultimate goal of achieving accreditation as full-fledged allopathic medical schools and enabling their graduates to become licensed physicians and surgeons.”

The task force also specified that transition would require podiatric medical schools to meet the same accreditation standards as allopathic medical schools, which are accredited by the Liaison Committee on Medical Education (LCME). “If we can accomplish this goal,” wrote Diane Przepiorski,¹ COA Executive Director, “podiatrists will receive the education, training and certification which will allow them to be licensed as a physician and surgeon in California.” CMA Chief Executive Officer, Dustin Corcoran, agreed and looked forward to “working with the COA and the CPMA to fully evaluate the education and training of podiatrists to identify and remove any remaining deficiencies, so that future podiatric medical graduates would simply be medical school graduates.”¹

After formation of the task force, it became clear that not everyone had the same expectation for the group. On May 18, 2011, Michael J. Cornelison, DPM,² then president of the CPMA, wrote that the goal of the CPMA is for all new graduates of podiatric medical schools who meet the criteria to practice in California “be awarded ‘California’s Physicians and Surgeons Certificate,’ which is an unrestricted license and the same license MDs and DOs receive in California.” He emphasized that “This is quite different than pursuing the MD degree itself.”

The CPMA position mirrors that of the American Podiatric Medical Association (APMA). In 2005, the APMA House of Delegates adopted the following resolution: “That the APMA commit itself to achieving the goal by 2015 of podiatrists being defined as physicians who treat patients in the physician’s specialty without restrictions.” Subsequently, a standing Vision 2015 Commit-

tee was established by the APMA, which would evaluate and ensure that podiatric medical education is comparable to that of allopathic and osteopathic physicians, and “Obtain state and federal government recognition that podiatrists are physicians.”³ There was no mention of accomplishing this goal by transitioning podiatric medical schools to LCME approved institutions.

There are many reasons that podiatrists would like to be deemed physicians and surgeons. Both the public and medical communities hold that designation in high esteem, as it is synonymous with a rigorous, comprehensive, and carefully regulated medical degree. There may also be financial incentives. The Veterans Administration calculates podiatry pay grades on a different scale from MDs and DOs. Podiatrists are designated as physicians under Title 19 of the Social Security Act for Medicare, but only for purposes of rendering services within a limited scope of practice. In many states, services by podiatrists are considered an optional benefit for Medicaid/medical programs and may not be reimbursed when state budgets are reduced. Perhaps the most important reason, however, is that physicians and surgeons have an unrestricted medical license and are allowed to practice the full range of medical services.

Podiatric medical school education continues to improve in California. The training may be equivalent in many ways to allopathic or osteopathic education, but they are not identical. How can they be? Allopathic and osteopathic students experience a broad-based medical education, as opposed to the more focused study of podiatric students. The “limited license” that podiatrists ultimately obtain simply reflects the type of work they have chosen to pursue.

The California joint podiatric task force is in the process of adding an LCME consultant to the group. This is an important step. The title of physician and surgeon is earned, and should be based on an educational standard established by a recognized accreditation agency, in this case the LCME, and not legislative fiat. ■

References

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