



IN ~ STRIDE

President's message



Steven D.K. Ross, MD

I do not know if it is blessing or a curse to be living in interesting times but there are certainly a lot of opportunities to learn new things and it is never dull. Your AOFAS continues to make progress on many fronts.

Medical education

Education continues to be the cornerstone of our organization. Education Committee Chair Steve Haddad, MD, and I represented the AOFAS at a recent CME summit hosted by the AAOS designed "to bring together all orthopaedic specialty society organizations to discuss the relevant common issues/topics, exchange ideas, and develop strategies to improve the quality and breadth of our respective CME programs." A key element of the program was a discussion led by Murray Kopelow, MD, CEO of the Accreditation Council for Continuing Medical Education (ACCME) on changes to ACCME standards. These revisions will affect how AOFAS education is planned and implemented, and they reflect the increased level of scrutiny by the accrediting organization towards industry support for educational activities.

The ACCME *Standards for Commercial Support* has been revised to ensure independence in CME activities with potential conflicts of interest including personal financial conflicts, industry relationships and conflicts, and other potential areas for bias or conflict. These standards, along with guidelines published by the Advanced Medical Technology Association (AdvaMed) and the Pharmaceutical Research and Manufacturers Association (PhRMA) are changing the way the AOFAS interacts with industry and hopefully will lead to programs in which each of you will be fully cognizant of potential bias in our CME activities. Additional information on industry relationships is available online at www.accme.org, www.advamed.org, and www.phrma.org. The ACCME is also mandating that all CME providers operate in a manner that integrates CME into the process for improving professional practice, meaning that the AOFAS will need to identify factors outside the provider's control that impact patient outcomes, and implement educational strategies to help physicians make changes in their clinical care. This will be a very exciting direction for our organization over the next several years.

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AOFAS Summer Meeting

Educational Opportunities – Technical Innovations – Hospitality await you in Denver!

Denver, Colorado – will be the site of the 24th Annual Summer Meeting, June 25-28, 2008. With its blend of natural beauty and urban enjoyment, Denver is one of the fastest growing cities in America and is ready to welcome AOFAS members and guests.

Hosting the meeting in Denver provides the ability to combine the meeting in a sophisticated and accessible city with a leisure experience in the nearby mountains. "Denver will provide AOFAS members with an excellent background for our educational program, and the social events will take place in stunning locations," states AOFAS President Steven Ross, MD.

"This meeting is being designed to offer a variety of interesting educational and social options for our members."

— Stephen Pinney, MD, program chair

Get the Mile High experience

The Denver Marriott City Center (headquarters hotel) is conveniently located in the heart of downtown, providing easy access to Larimer Square, the LoDo District and the 16th Street Mall, all known for their unique restaurants and shops, evening entertainment, and people watching as well as to numerous attractions such as the State Capitol, Denver Art Museum, Elitch Gardens amusement park, and more. Plan to extend your stay through the weekend to enjoy mountain activities or possibly take a 90-minute drive to nearby Colorado Springs to enjoy a train ride up Pike's Peak, visit the Air Force Academy, tour the



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President's message

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The AOFAS is moving toward establishing a program of educational activities you can count on to plan your CME participation. Along with our Annual Summer Meetings and Specialty Day Winter Meetings, we will be offering a spring and fall course each year. Topics will rotate based on the needs and wants of our members. This year's spring course will be the Advanced Foot and Ankle Course in San Francisco, May 1-3, chaired by Dr. David Thordarson and co-chaired by Keith Wapner, MD. I encourage you to attend.

Research

Research has remained a strong focus of our Society. The AOFAS annually sponsors basic science and clinical research projects with funding from member and corporate contributions to our Outreach & Education Fund (OEF) and to the Orthopaedic Research and Education Foundation (OREF). The generosity of our industry partners and individual members allowed the AOFAS to award \$60,000 in grants in 2007. I would encourage you to go to www.aofas.org and read the 10 Year Review of the AOFAS Research Grants Program summarizing the results of our funded research. I think you will be pleased and proud to see the listing of presentations, published articles, and additional research funding achieved as a result of AOFAS-sponsored grants. I hope this will encourage each and every one of you to make an annual contribution to the OEF. The Research Committee will announce the recipients of our 2008 research grants during the Specialty Day program. It is not too

early to start planning a research project for next year. The call for grant applications will begin at the Summer Meeting and application information is available on the AOFAS Web site.

Policy issues

Health care policy has focused on providing input to the AMA Scope of Practice Data Series which I hope all members will take the time to read. It is available on the members-only side of our Web site. The AOFAS has continued to adhere to the principle that educational standards are essential in ensuring that patients have the best care possible. Your health care policy team has become intimately involved with the AAOS and our other partners in efforts to focus the upcoming national debate on health care reform. Your continued involvement in completing surveys for the AMA Relative Value Update Committee (RUC) process is very important and has been very valuable. It is essential to have an adequate number of responses to RUC surveys so that the services we provide to our patients can be valued fairly.

Finally, in keeping with my last address to you I would like to continue to encourage each and every one of you to volunteer in support of our Society. Simply login to www.aofas.org, fill out the bio-application form, and let us know where your interests lie. Committee applications will be reviewed by the Committee on Committees later this spring and committees will meet at the Summer Meeting in Denver. I look forward to seeing all of you at Specialty Day in San Francisco.

Steven D.K. Ross, MD

Members in the News alert!

Don't forget to check the AOFAS Web site *Members in the News* section for your name! Members are continually highlighted for their medical and community achievements by their local media and these events are caught by the AOFAS staff or sent in by members and made a part of the ongoing Web site section. Simply login to www.aofas.org and click on 'Members in the News.'

Member news!

Pierce Scranton, MD, has recently received a "Finalist" award in the Fiction/Thriller category from USABookNews.com, an independent literary review organization. Dr. Scranton received this award for his new novel *Death on the Learning Curve*, a story of the events that constitute a young surgical resident's training.

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Fellowship Match update

The match is well underway

Winter and spring are particularly busy for residents interviewing for fellowship positions and for fellowship directors and their faculty who are conducting interviews, with each side seeking the best fit for their respective rank order lists to be submitted in May for the fellowship match.

The AOFAS-sponsored Orthopaedic Fellowship Match, administered by the National Resident Matching Program (NRMP), is well underway. The AOFAS Board of Directors and its Fellowship Match Committee are pleased to report that 37 of 38 (97%) orthopaedic foot and ankle fellowship directors signed legal agreements with the Society committing their programs and faculty to participation in this year's match and adherence to parameters beyond those required by the NRMP. A total of 59 positions are being offered for 2009-2010 foot and ankle fellowships.

For this second year of the reinstated match, the Society has taken pro-active steps to improve the process for residents. The AOFAS office serves as an information resource and the application clearinghouse for the foot and ankle match, and a universal application form, approved by most orthopaedic foot and ankle fellowship programs, is on the AOFAS Web site. Applicants have been submitting their completed documents to the AOFAS office since early fall. As of late January, 46 applications have been received, and a total of 461 applications have been sent to fellowship programs selected by the applicants. Statistics are being gathered on the process and interviews are now taking place.

Match timetable

Jan. 16 – Registration opened for programs and applicants on the NRMP Web site.

March 26 – Applicants and programs may begin submitting their rank lists to the NRMP.

April 23 – All programs must inform the NRMP of any change in the number of positions to be offered in the match. No positions may be withdrawn.

May 7 – Deadline for programs and applicants to submit their rank lists to the NRMP.

May 21, Match Day – Matched and unmatched applicants and programs will be simultaneously notified at 12 pm EST by NRMP. Unmatched applicants may "scramble" for unmatched positions.

Interest in a universal orthopaedic match

Meanwhile, there is interest among the American Academy of Orthopaedic Surgeons, American Board of Orthopaedic Surgery, American Orthopaedic Association, and the various orthopaedic subspecialty societies in exploring establishment of a universal orthopaedic match in the future. The AOFAS Board supports the principles of and is interested in participating in a universal match, believing it is the "right thing to do" for residents and for orthopaedics as a specialty. At the same time, the Board acknowledges that a thorough evaluation of the details of a future universal match will be needed before a definite participation commitment can be made.

May Advanced Foot and Ankle Course – *Focus on reconstruction*

The Advanced Foot and Ankle Course: Reconstruction and Salvage of Complications will be held May 1-3, 2008 at the InterContinental Mark Hopkins Hotel in San Francisco, California. Course chairs are David Thordarson, MD, and Keith Wapner, MD.

"This case-based course has been designed to discuss in detail what's new and cutting edge in a technique-oriented manner," reports chair David Thordarson, MD. "The most challenging problems and how to manage them will be the focus of this course."

This two and one-half day interactive course will address a multiplicity of problems associated with the management of complete foot and ankle pathology. This course is designed for orthopaedic surgeons, fellows, and residents who treat acute and chronic problems. Attendees will be encouraged to bring their own difficult cases to discuss with faculty during a series of breakout groups and complications sessions.

Program topics include:

- Posterior tibial tendon dysfunction
- Medial cuneiform osteotomy
- Different types of calcaneal osteotomies
- Current management of stage IV deltoid reconstruction
- Current management of talar OCD lesions
- Current management of Charcot midfoot, hind foot and ankle problems
- Current update on total ankle arthroplasty in the U.S.
- Update on the management of syndesmotic injuries complications (including tight rope fixation)
- How to choose the right bunion osteotomy
- Treatment trends in Achilles' tendonosis
- Management of complex foot and ankle trauma

Serving on the faculty will be:

David B. Thordarson, MD, Chair

Keith L. Wapner, MD, Co-Chair

Ned Amendola, MD

Judith F. Baumhauer, MD

James W. Brodsky, MD

J. Chris Coetzee, MD

Michael J. Coughlin, MD

Steven L. Haddad, MD

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Roger A. Mann, MD

Mark S. Myerson, MD

James A. Nunley, II, MD

Charles L. Saltzman, MD

Bruce J. Sangeorzan, MD

Lew C. Schon, MD

Alastair Younger, MD



Specialty Day – March 8, 2008

Join your colleagues for the 38th Annual AOFAS Winter Specialty Day, Saturday, March 8, at the American Academy of Orthopaedic Surgeons Annual Meeting in San Francisco. The meeting will take place in the Moscone Center West from 7:00am – 5:00pm.

Consisting of a mix of symposia, select free papers, debates, and invited speakers, the program is geared towards both the



general orthopaedic surgeon and the orthopaedic foot and ankle specialist. The program has been designed to allow for more discussion and expanded audience interaction. "New to the program will be a series of presentations by masters of our specialty who have been invited

to tell the audience anything they think will make us better doctors," says Stephen Pinney, MD, 2008 program chair. To review the complete program, go to www.aaos.org or www.aofas.org.

All AOFAS Active Members are encouraged to remain for the Annual Business Meeting, slightly overlapping with the lunch break.

AOFAS Specialty Day Reception

The newly opened San Francisco InterContinental Hotel will be the site of the AOFAS Annual Specialty Day Member Reception. Join colleagues and friends the evening of Saturday, March 8, 6:30 – 8:30pm on the Pacific Terrace for hors d'oeuvres, cocktails, and great conversation. Members must bring their invitations and wear their badge for admittance.

CME for 2008 Specialty Day

The American Orthopaedic Foot & Ankle Society is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education.

The AOFAS designates this education activity for a maximum of 8.5 **AMA PRA Category 1 Credits™**. CME certificates may be obtained after 3:00 pm March 8, 2008 by visiting the marked kiosks in the Moscone Convention Center.

Following the meeting, CME certificates will be available on the AAOS Web site at www.aaos.org.

AOFAS selected for AAOS Annual Meeting media briefings

Specialty societies submitted abstracts from their Specialty Day programs for potential use as AAOS press releases and media briefings by the authors. Of the many submitted, two AOFAS presentations were selected for media briefing panels, which will take place in Rooms 224-226 in the Moscone South Mezzanine. They include:

Iraq: Orthopaedic Surgeons Fighting the Fight off the Battlefield

Wednesday, March 5, 2008, 10:30 am

Eric Bluman, MD, will participate discussing Wound Dressings

Sore Step Relief: New Treatments for Plantar Fasciitis

Friday, March 7, 2008, 11:00 am

Moderator: Steven D.K. Ross, MD

Panel: Benedict F. DiGiovanni, MD

Troy S. Watson, MD

John G. Anderson, MD

AOFAS Career Center

Visit the Web site, www.aofas.org, to access resumes or job postings in the foot and ankle profession. Click on 'Career Center' under 'What's New' on the home page.

For Foot and Ankle JOB SEEKERS

- Post your resume for free
- Post your resume anonymously
- Search foot and ankle job postings
- Access a library of career-related articles and resources
- Open to AOFAS members and non-members



For Foot and Ankle EMPLOYERS

- Gain access to active and passive job seekers
- Search resumes for free
- Purchase a single posting or a package
- Give job seekers full access with JobAlert
- No charge to create your employer account
- Open to AOFAS members and non-members

The AOFAS Career Center is managed by Job Target, Inc. Income from Career Center supports the Society's activities. For career needs and resources, visit www.aofas.org and click on Career Center on the home page under What's New.

Annual Summer Meeting

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Garden of the Gods, or explore the Cave of the Winds. The Mile High City has activities for all ages and interests. Visit www.denver.org for a full listing of things to enjoy while you're in town.

Program highlights

Stephen Pinney, MD, program chair, and his committee have created a well-rounded educational program designed to appeal to the largest assembly of foot and ankle orthopaedic surgeons. "We have a wonderful meeting lined up, with cutting-edge presentations and new information on all aspects of foot and ankle surgery," says Dr. Pinney. A record number of paper presentations will be integrated with innovative symposia, debates, guest speakers, and e-poster viewing stations. The full program will be posted to the AOFAS Web site at www.aofas.org in early March and updated when necessary.

What's new

"This meeting is being designed to offer a variety of interesting educational and social options for our members," says Dr. Pinney. The expansion of the general scientific session into concurrent programming on Saturday will provide attendees with programming choices and allow flexibility in topic placement.

The meeting will include a repeat performance of the successful 2007 CPT Coding Course, presented once again by AOFAS members Walter Pedowitz, MD, Raymond Sullivan, MD, and Peter Mangone, MD. This highly rated and interactive optional afternoon session will provide in-depth information based on sound coding principles.

In collaboration with the American Academy of Orthopaedic Surgeons (AAOS) and the Institute for Healthcare Communication, the AOFAS will present the very successful and interactive Communication Skills Workshop designed to improve patient/physician relationships. The fast paced four-hour course, led by orthopaedic colleagues who are trained as communications skills mentors, will follow a core curriculum based on scientific evidence that is intended to provide attendees with opportunities to practice skills and techniques.

For the entire team

Also new is a Friday morning session for the administrative member(s) of your office team. Partnering with the American Association of Orthopaedic Executives (AAOE), formerly known as the BONES society, a session on a variety of crucial administrative issues will be presented to your practice manager. Dr. Pinney states, "Human resources, contracting, the use of physician extenders, and physician compensation and distribution models are but a few of the topics geared toward your staff, with the goal of enhancing the management standards of your orthopaedic practice."

State-of-the-Art Management of Ankle Arthritis

This 5th annual pre-meeting course presents a unique and in-depth review of the challenging clinical issues involved in treating ankle arthritis. This course will focus on the current treatment alternatives for ankle arthritis and highlight recent innovative arthroplasty designs and techniques from the

U.S. and abroad. "You can expect to gain an excellent understanding of and insight into the current treatment alternatives for the management of ankle arthritis," predicts Nicholas Abidi, MD, course chair. In addition to the morning CME-based course, attendees will be able to rotate through several satellite afternoon industry sessions on topics covered during the course, presented directly by participating industry companies.



INVESCO Field: Family Gala Site

Exhibit Hall

The Exhibit Hall will showcase more than 60 companies' products and services. Be sure to set aside dedicated time to share a cup of coffee or soft drink with new and returning exhibitors throughout the meeting. The hall will open at 6:00 pm on Wednesday, June 25, as the site of the annual Welcome Reception – the perfect venue to reunite with old friends and meet new colleagues.

Registration begins in March – Watch for your brochure in the mail! Visit www.aofas.org for up-to-date registration and program information.

Preliminary Summer Meeting at a Glance*

Wednesday, June 25, 2008

7:00 am Pre-meeting Course on Ankle Arthritis
Afternoon. Industry-presented Workshops
Afternoon. Optional Mint / Museum Tour
6:00 pm Welcome Reception in Exhibit Hall
(children's activity available)

Thursday, June 26, 2008

6:15 am – 1:30 pm . . Exhibit Hall Open
7:00 am – 1:00 pm . . Scientific Session
Mid-morning Optional Boulder Tour for Spouses/Guests
1:00 – 4:30 pm AAOS Communication Skills Workshop
1:30 – 3:00 pm CPT Coding Course
Afternoon. Annual Kenneth A. Johnson Golf Tournament
Evening OEF and International Attendee Reception

Friday, June 27, 2008

6:15 am – 1:30 pm . . Exhibit Hall Open
7:00 am – 1:00 pm . . Scientific Sessions (I and II)
8:00 am – 12:00 pm . Office Staff Session
Afternoon. Optional Mountain / Brewery Tour
Evening Family Gala at INVESCO Field

Saturday, June 28, 2008

7:00 am – 12:00 pm . . Scientific Session
Afternoon. Optional Rafting Trip

*Times listed are preliminary and are subject to change

2007-2008 Committees and Task Forces

Your service is appreciated!

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J. Chris Coetzee, MD
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Selene G. Parekh, MD
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W. Hodges Davis, MD, 2009 Program Committee Chair (ex-officio)
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James R. Ficke, MD, 2008 Military Visitation Program Chair (ex-officio)
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Raymond J. Sullivan, MD
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Visit the Center for the Intrepid

AOFAS announces Military Visitation Program Brooke Army Medical Center, April 10-11

Just over one year ago the Center for the Intrepid (CFI) at Brooke Army Medical Center outside San Antonio was officially dedicated and opened its doors to the injured servicemen and women of our armed forces. Now AOFAS members are invited to visit the center, learn of the work of military colleagues, and meet with military personnel receiving treatment.

The AOFAS Military Visitation Program will begin with a reception on Thursday evening, April 10, and the program and tours of the center will be on Friday, April 11. The four-story 65,000-square-foot facility includes clinical, research, and administrative space; a gait lab; a computer-assisted rehabilitation environment; a pool; an indoor running track; a two-story climbing wall; and a prosthetic fabrication lab.

The center's medical care is under the direction of the chairman of the Department of Orthopaedics and Rehabilitation at Brooke Army Medical Center, James Ficke, MD, Col. MC, who serves as program chair for this visitation program.

"We are really looking forward to having fellow AOFAS members here for the Visitation Program," says Col. Ficke. "This state-of-the-art center has been funded with generous donations from over 600,000 Americans, and it is as a testament to the sacrifices of our military personnel. We are very proud of this new facility and to be able to provide service members with severe extremity injuries and amputations the opportunity to maximize their ability to live and work productively."

The AOFAS designates this educational activity for a maximum of five hours of *AMA PRA Category 1 Credits™*. For further information on the program, hotel reservations, and registration, visit www.aofas.org.



Specialty Day 2009: Abstract submission guidelines

Deadline: June 14

Specialty Day 2009 will be held on Saturday, February 28 in Las Vegas, Nevada and abstracts are now being accepted for committee review. Submitting an abstract online is easy and a review of the suggested guidelines below as prepared by Stephen Pinney, MD, 2008 Program Committee Chair, Samuel Flemister, MD, 2008 Research Committee chair, and W. Hodges Davis, MD, 2009 Program Committee chair will assist you in your efforts. To access the online system, go to www.aofas.org and follow the links appearing under the 38th Annual Specialty

Day meeting heading. The deadline for the 2009 Specialty Day abstract submission is midnight, Wednesday, June 4, 2008.

New to the system will be the mandate that disclosures are required for all authors (not just the corresponding author) and your abstract will not be considered completed if disclosures are missing for any authors. Paper presentations for Specialty Day 2009 must be presented within a five-minute period during the scientific session.

Follow these suggested guidelines to improve your chances of getting your abstract accepted:

- Login or set up login information; your login and password allow you to submit multiple abstracts, view, resume, edit, or withdraw a submission.
- Keep your abstract under the maximum word limit of 500 or less.
- Identify subheadings, including: background, purpose, method, results, discussion, and conclusion.
- Use easy to understand and concise wording.
- Identify your primary research question.
- Use accepted methods of study design (e.g., prospective randomized control trial, cohort study, retrospective review).
- Clearly define your outcome measures.
- Use appropriate statistical methods and consult with a statistician if needed. Draw conclusions based on the statistical analysis of the study results, not personal opinion.
- Submit the results of your study in your abstract. Make no reference to results "to be presented later."
- When making a conclusion that there is "no difference" between items, do so only after an appropriate power analysis. Your conclusion should be reasonable and understandable.
- Submit original research that has not previously been published or presented at any other AOFAS meeting. Research material may have been submitted elsewhere, but this must be noted.
- Assign a Level of Evidence to your research study.



AOFAS Patient-Education Brochures

Order yours today!

Since the spring 2007 launch of the redesigned patient-education brochures sales have exceeded expectations. The Adult Foot brochure has been leading the way as the most popular title ordered.

Available to AOFAS Candidate and Active Members, these brochures can be used as a practice enhancement tool before, during, or following consultation. Brochures are AOFAS-branded for added credibility and are conveniently sized to fit into a business-size envelope or to display in your reception area or exam room.

Of the total orders placed to date more than 80% have included personalization. Take advantage of the Society's limited time FREE OFFER to imprint your practice information on each brochure as outlined in the ad below and on the enclosed order form.

To decide if these brochures are right for you, read the statements that follow from satisfied colleagues.

And now a few words from satisfied customers...

"The new AOFAS personalized patient-education brochures have been an invaluable resource in my busy foot & ankle clinic. Many patient questions are already answered in the brochures even before I step into the examination rooms, saving valuable time and focusing our discussions. New patients have learned about my office solely from the personalized patient-education brochures circulating in the community. In addition, my name on the brochures has been an excellent marketing tool differentiating my practice from other foot & ankle providers in the area."

– Steven Neufeld, MD

"These three brochures are a very nice addition to patient education – both because they help me explain to patients their conditions and treatment and, also, for them to retain the salient points for them to comply better with their treatment plan."

– Joe Eremus, MD

AOFAS Patient-Education Brochures



AMERICAN ORTHOPAEDIC FOOT & ANKLE SOCIETY

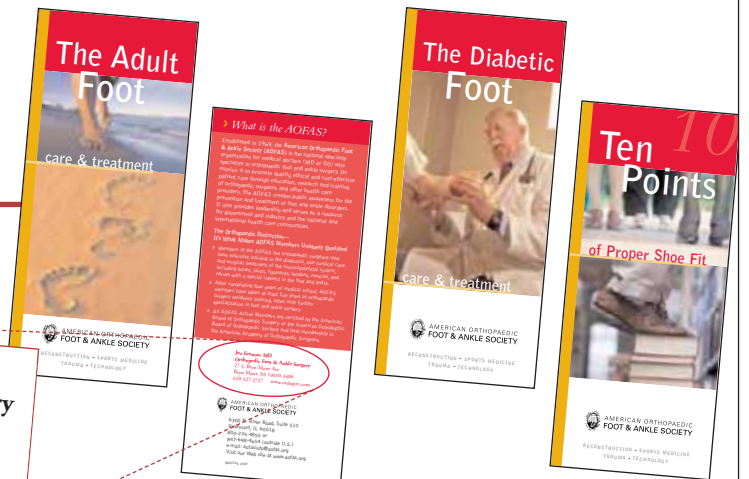
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CONTACT THE AOFAS FOR COMPLETE INFORMATION:
www.aofas.org • aofasinfo@aofas.org • 800-235-4855

AVAILABLE TO CANDIDATE AND ACTIVE MEMBERS

New disclosure, conflict of interest program

AOFAS to collaborate with AAOS

As physician relationships with medical device manufacturers and pharmaceutical companies have come under increased public and government scrutiny, the Accreditation Council for Continuing Medical Education (ACCME), the group which accredits organizations to give CME credit, has also become more focused on these relationships and their potential to control content of medical education.

In keeping current with the ACCME Standards for Commercial Support, all accredited CME providers, such as the AOFAS, are required "to show that everyone who is in a position to control the content of an education activity has disclosed all relevant financial relationships with any commercial interest to the provider." The dollar amount of the conflict is irrelevant; the ACCME defines a financial relationship as any amount of money, stock, equipment, or anything else of value.

Thus it has always been, and continues to be, important to identify actual or potential conflicts of interest which might improperly affect AOFAS activities and decisions. In order to ensure balance, independence, objectivity, and scientific rigor in all its educational activities and in accordance with the ACCME Standards, AOFAS policy requires all individuals in a position to influence and/or control the content of AOFAS CME activities to disclose whether they do or do not have any relevant financial relationships with proprietary entities producing health care goods or services. These individuals include AOFAS officers, directors, committee members, instructors/faculty members, and senior staff, who are all required to sign annual disclosure statements.

Collecting, accessing, and reporting disclosure information has recently become easier for the AOFAS in part thanks to the creation of the AAOS Online Disclosure system (www.aaos.org). The goals of the AAOS comprehensive reporting program are to increase transparency of member relationships, simplify the disclosure process, reduce the requests made on members in collecting this information, and save members' time.

The AAOS online system, introduced in September, requires updates at regular six-month intervals and consists of a series of 10 questions assessing members' financial relationships ranging from board and consulting positions to royalties, honoraria, research or institutional support, stock ownership, and other financial or material support. The online program provides 24/7 access to an

individual's disclosure information and is available to all AAOS members in a password-protected area of www.aaos.org. The AOFAS has access to view and report this information and will provide submitted information in its entirety in any and all program material and administrative dealings.

"If (a member) is in doubt of what to report, one should err on the side of full disclosure. This will permit an objective and impartial determination of any and all the possible conflicts by the Society," states President Steven Ross, MD. "Development of this system represents a tremendous amount of work and the AOFAS is pleased to be able to access and support this member service."

"Disclosed information is widely publicized and will continue to be listed as a component of an activity. It is directly attached to the presentation to which it applies. CME faculty are instructed to disclose verbally at the beginning of their presentation and are instructed to include their disclosure on a slide at the beginning of their presentation – strict adherence to ACCME guidelines is followed," reports Steven Haddad, MD, Education Committee chair.

"Audiences must be given the opportunity to properly evaluate information, analysis, and opinions during an educational activity," says Dr. Haddad. "It is crucial that the audience be informed of any personal or professional circumstance, originating with anyone in a position to control or offer educational content, out of which a perception of conflict of interest (COI) would arise. COI is carefully monitored by the Education Committee and issues of non-compliance with ACCME policy are in place to resolve any circumstance that may pose a barrier to a fair and balanced learning opportunity."

"The purpose of integrating disclosure mandates is not to discourage involvement by AOFAS members in activities. Instead, our obligation is to ensure the delivery of education and direction that is balanced and free of the control of commercial bias," says Dr. Ross. "Important contributions to patient well-being have resulted from partnerships between orthopaedists and industry – but above all else, we need to protect the independence of our CME activities."

AOFAS members are urged to visit www.aaos.org and complete and/or update their disclosure information. For more information on ACCME Standards for Commercial Support, visit www.accme.org.

From then ... till now, an AOFAS timeline

At the 2008 AAOS Annual Meeting in San Francisco, the Academy is celebrating its 75th Anniversary. Many projects are coming together to celebrate this event with one of the featured happenings being the **Digital Timeline**, an online, interactive historical timeline that includes seminal, clinical events from each specialty society. Read below and learn about technical advancements, new surgical procedures, highlights in research, and historical events that have contributed to the growth of **AOFAS** through the years.

- 1969** The American Orthopaedic Foot Society is founded; Nathaniel Gould, MD, and Melvin Jahss, MD, write the first bylaws; and Robert Joplin, MD, is elected the first president. Other original founders include, Paul Lapidus, MD, Joseph Milgram, MD, Nicholas Giannestras, MD, and Hampar Kelikian, MD.
- 1969** Dr. H.W. Buchholz is the first orthopaedic surgeon to utilize total ankle prosthesis. The medical community recognizes that ankle replacements permit patients a range of motion which tend to mimic the natural human joint.
- 1970** The AOFAS establishes training courses for shoe corrections at Ball State University, New York University, and Northwestern University in alliance with the Prescription Footwear Association.
- 1971** The first clinical meeting of the AOFAS, held in San Francisco, was a resounding success. Over 800 people attended a special symposium on club foot and the lecture hall for the general Foot and Ankle meeting (presided over by our second president, Nicholas Giannestras, MD) was filled to capacity.
- 1972** Rancho Los Amigos Medical Center establishes an Amputee/Diabetic Foot Service.
- 1980** The AOFAS establishes the *Foot & Ankle* journal with Melvin Jahss, MD, as editor under presidency of J. Leonard Goldner, MD.
- 1980** An epidemiologic survey of foot problems in the U.S. is published in the *Foot & Ankle* journal.
- 1980** The Brostrom-Gould procedure for repair of lateral ligament of the ankle is introduced and continues to be a popular procedure worldwide.
- 1981** Disorders of the Foot is published by Melvin Jahss, MD.
- 1982** Transcutaneous muscle stimulation is first used to prevent atrophy, build musculature, and relieve pain in sprains.
- 1983** The American Orthopaedic Foot Society changes its name to the American Orthopaedic Foot & Ankle Society.
- 1983** Kenneth Johnson, MD, addresses posterior tibial tendonitis which leads to improved diagnosis and spurs interest in the acquired adult flat foot and subsequent research into the etiology and treatment of this common disorder.
- 1984** A surgery for Charcot-Marie-Tooth disease is documented in International College of Medicine and Surgery of the Foot.
- 1984** Frank Alvine, MD, develops the Agility Ankle®, a total ankle replacement joint, now used nationwide.
- 1985** Kenneth Johnson, MD, establishes a description, classification, and surgical treatment of the adult acquired flatfoot.
- 1985** Roger Mann, MD, performs a proximal osteotomy for bunion correction, popularizing the procedure.
- 1987** Dr. James Guhl performs the first ankle arthroscopy procedure.
- 1987** Roger Mann, MD, performs a hallux metatarsophalangeal (MP) fusion to correct rheumatoid forefoot deformity, popularizing the procedure.
- 1988** Dr. J. Dean Cole, who pioneered the minimally invasive approach to treating orthopaedic trauma, develops cannulated screws. He also invents new types of implants and devices to aid in successful surgical outcomes.
- 1988** Thomas Clanton, MD, and Roger Mann, MD, perform a cheilectomy for hallux rigidus, concluding that it is a better treatment for hallux rigidus than arthrodesis, resection arthroplasty, or arthroplasty with using a flexible implant.
- 1994** The AOFAS establishes the Roger A. Mann, MD, Award for the Best Clinical Paper presented at its annual meeting.
- 1994** The inaugural Kenneth A. Johnson Memorial Lecture is presented at the AOFAS annual meeting.
- 1995** Keith Wapner, MD, performs the first flexor hallucis longus (FHL) tendon transfer for Achilles tendon reconstruction.

- 1996** Bruce Sangeorzan, MD, and a group from Harborview Medical Center, University of Washington Medical School in Seattle, WA, perform an osteotomy (lateral column lengthening) in the correction of the adult flatfoot deformity.
- 1997** The AOFAS begins awarding research grants.
- 1998** The first J. Leonard Goldner Award for the Best Research Paper is presented at the AOFAS annual meeting.
- 1999** The founding meeting of the International Federation of Foot & Ankle Societies is held in Kyoto, Japan.
- 2000** The AOFAS changes the name of its journal from *Foot & Ankle* to *Foot & Ankle International*.
- 2001** A fundraising campaign for the Outreach & Education Fund (OEF) is launched by the AOFAS during the presidency of Pierce Scranton, MD.
- 2002** The AOFAS begins a humanitarian service program with first Overseas Outreach Project to Vietnam, funded by its Outreach & Education Fund.
- 2002** The 1st Triennial Scientific Meeting of the International Federation of Foot & Ankle Societies (IFFAS) is hosted by the AOFAS in San Francisco.
- 2004** The Orthopaedic Foot & Ankle Outreach & Education Fund (OEF) of the AOFAS is incorporated as a 501(c)(3) charitable organization.
- 2004** The AOFAS presents first Best Posters Awards at the Annual Summer Meeting.
- 2005** The Society office of the AOFAS relocates to Rosemont, Illinois.
- 2005** The AOFAS hosts the 2nd International Congress on Total Ankle Replacement & Ankle Arthritis in Boston, MA, preceding the AOFAS 21st Annual Summer Meeting.
- 2005** The first Traveling Fellowships are awarded by the AOFAS, funded by the OEF.
- 2006** The AOFAS introduces E-Posters at the Annual Summer Meeting.
- 2006** The first Best Technique Tip Awards are presented at the AOFAS Annual Summer Meeting.
- 2007** The AOFAS holds a new course in New Orleans, LA, called *The Road to Nowhere: Complications in Foot and Ankle Surgery, Finding the Right Path to Surgical Success*.

AOFAS 2008 meetings calendar

Information and registration: www.aofas.org unless otherwise indicated. AOFAS Members, please login to register online to receive member rates.

March 8, 2008

SPECIALTY DAY

Program Chair: Stephen Pinney, MD
The Moscone Center West, San Francisco, California
Onsite registration available through AAOS.

April 10-11, 2008 – REGISTRATION IN PROGRESS
Limited Space

MILITARY VISITATION PROGRAM: CENTER FOR THE INTREPID

Program Chair: James Ficke, MD, Colonel, MC
Brooke Army Medical Center, Ft. Sam Houston, Texas

May 1-3, 2008 – REGISTRATION IN PROGRESS
Expected to Sell Out

ADVANCED FOOT AND ANKLE COURSE

Program Chair: David Thordarson, MD
Program Co-Chair: Keith Wapner, MD
InterContinental Mark Hopkins, San Francisco, California

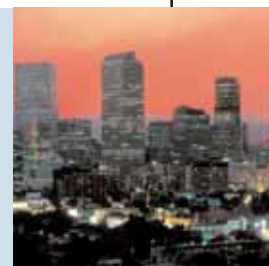
June 25-28, 2008 – SAVE THE DATE

AOFAS 24th ANNUAL SUMMER MEETING

Program Chair: Stephen Pinney, MD

PRE-MEETING COURSE: State-of-the-Art Management of Ankle Arthritis (June 25)

Program Chair: Nicholas Abidi, MD
Marriott Denver City Center, Denver, Colorado



September 13-14, 2008 – REGISTRATION IN PROGRESS

MASTERS EXPERIENCE: FOOT & ANKLE ARTHROSCOPY

Sponsors: AOFAS and AANA
Orthopaedic Learning Center, Rosemont, Illinois
Information and registration overseen by the AANA:
www.aana.org

October 2-4, 2008 – SAVE THE DATE

COMPLETE FOOT CARE COURSE

Program Chair: Christopher Chiodo, MD
The Boston Park Plaza & Towers, Boston, Massachusetts

November 7-8, 2008 – SAVE THE DATE

SURGERY OF THE FOREFOOT AND MIDFOOT: FROM TRAUMA TO RECONSTRUCTION

Program Chair: To be determined
Location: To be determined

Watch for new programs in development and additional information at www.aofas.org.

ORTHOPAEDIC FOOT & ANKLE OUTREACH & EDUCATION FUND

The generous contributions of individual and corporate donors to the Outreach & Education Fund (OEF) support important AOFAS programming in research, education, and humanitarian service. The projects accomplished to date by the AOFAS, through funding from the OEF, have been many and varied. Innovative research studies have flourished with monetary support from the OEF. Children and adults with severe foot and ankle injuries and deformities have been helped in Vietnam and other parts of the world, and young AOFAS members have exchanged knowledge with experienced surgeons at clinical, teaching, and research centers.

Thank you to the growing number of members who have donated and made financial pledges to the OEF.

Your commitment helps the Society continue its mission. Thank you for your gift and for sharing the vision.

The AOFAS is pleased to recognize
Wright Medical
as a
Platinum Level Donor
for its \$250,000 commitment to the OEF.

Research Grants Program makes great strides

Just past the 10-year anniversary of the AOFAS Research Grants Program and the many accomplishments of the grant recipients continue to grow. Today and since the program was established in 1997, generous donations from individuals and corporations to the AOFAS Outreach & Education Fund (OEF) and to the Orthopaedic Research and Education Foundation (OREF) make possible the essential goal of advancing foot and ankle investigation by providing seed funding for promising research projects and encouraging supplemental submissions to national funding sources. To date, grant winners have utilized their research as the impetus to receive over three million dollars in subsequent grants and awards. The AOFAS has awarded 15 basic research projects as well as 35 clinical research studies.

"Every federal grant institution is facing a shortage of funding," says grant recipient, Bruce Sangeorzan, MD. "Without seed money to collect good pilot data, no proposal is likely to be funded. The AOFAS grants provide that opportunity."

In 2007 the Research Committee surveyed grant recipients from the program's inception to present day in order to compile specific accomplishments of the program. Available on the Web site at www.aofas.org (click on Orthopaedic Professionals, and OEF Funded Projects); the 10 Year Review of the AOFAS Research Grants Program showcases the evolving accomplishments of the grant recipients.

10 year review of the AOFAS Research Grants Program

Grants awarded by the AOFAS have resulted in innovative insights in foot and ankle care, 105 presentations at AOFAS and other educational meetings, 58 published articles in *Foot & Ankle International* and other specialty journals, in addition to larger grants from national sources.

"We are immensely excited about the success of the Research Grants Program," says Samuel Flemister, MD, AOFAS Research Committee chair. "This important membership benefit has enhanced the knowledgebase of our profession and benefited our patients."

Grants advance knowledge and clinical treatment

"With the funds we received from the AOFAS, my colleagues and I were able to investigate the use of a 'cutting-edge' technology, viral-vector mediated gene therapy," says Brian C. Toolan, MD. "Our grant allowed us to open the door to a potentially revolutionary advancement in the treatment of Achilles tendon injuries and provided us the opportunity to obtain the preliminary data necessary to pursue further funding for our research."

The AOFAS Research Grants Program has expanded orthopaedic foot and ankle knowledge to the extent of positively impacting the quality of patient care through innovative procedures and enlightened methods of treatment.

James Nunley, II, MD, comments on the clinical outcomes of his AOFAS funded research: "...based on our first grant looking at vascular territories in the foot, we have been able to create a surgical procedure that was unavailable for patients with avascular necrosis of the talus and the navicular. To date, I have done over 20 patients' surgeries based on the discovery we made of vascularized bone grafts in the foot and ankle."

The vitality and advancement of the orthopaedic foot and ankle profession depends upon contributions by the youngest (in age or experience) members of the discipline. Under the guidance of an AOFAS Active, Candidate, or International Member, young residents and fellows have the opportunity with the grants program to venture into the essential field of orthopaedic foot and ankle research.

Dr. Nunley says, "Without the AOFAS seed grant, many of my residents would not have been able to pursue true academic careers. The two grants that I got both stimulated a resident and a fellow to go into academic careers. Certainly, at this time there is a paucity of foot and ankle trained surgeons in academic medical centers and the ability to use the AOFAS seed grant to entice residents into the realm of possibilities for research can only increase our ability to staff the academic medical centers."

see Research grants, page 13

2008 Vietnam Outreach Project

Plans for the seventh AOFAS Overseas Outreach Project to Vietnam in May-June are well underway. Participants in this year's project will be Dale Blasier, MD, Paul Hecht, MD, Francis McGuigan, MD, Naomi Shields, MD, and Keith Wapner, MD. Applicants were reviewed by the Humanitarian Services Committee and approved by the Board of Directors. The selected participants are preparing for challenging and interesting times.

"They will operate on children and adults with deformities and disabilities in four provincial hospitals and rehab centers in the northern part of Vietnam and will build relationships by working side by side with Vietnamese orthopaedic surgeons," states Ruth Thomas, MD, Humanitarian Services Committee chair.

The surgeons, who volunteer for two weeks and pay their own travel expenses to Vietnam, are motivated by the opportunity to "give back." The project includes a co-sponsored conference in Hanoi that brings together 180 Vietnamese orthopaedic surgeons for presentations by both AOFAS members and Vietnamese surgeons. The project is supported by the OEF with donations from members and corporations.

Vietnam Project named to honor roll

The Outreach Project to Vietnam has been named to the 2008 *Associations Advance America Honor Roll*, a national awards competition sponsored by the American Society of Association Executives (ASAE) and The Center for Association Leadership, Washington, DC.

More than 60 patients, mostly children, were operated on during the 2007 project, and more than 350 patients have received surgery without charge since 2001. Conditions easily treated at a young age in the U.S. are neglected in Vietnam due to distance to good medical care and the cost of care.

The prestigious *Associations Advance America Awards* program, now in its 18th year, recognizes associations that propel America forward – with innovative projects in education, skills training, standards setting, business and social innovation, knowledge creation, citizenship, and community service. Although association activities have a powerful impact on everyday life, they often go unnoticed by the general public.

"The AOFAS program truly embodies the spirit of the *Associations Advance America* campaign. It is both an honor and inspiration to showcase this activity as an example of the many contributions associations are making to advance American society," remarked *Associations Advance America* Committee Chair Matthew D'Uva, CAE.

Bring instruments and supplies for Vietnam to Specialty Day

In preparation for the project, the Humanitarian Services Committee is collecting small instruments and supplies. Deposit any of the following in the designated box at the OEF display at the AOFAS Specialty Day program.

- Small instruments (small dissecting scissors, Adson forceps, small osteotomes, small Weitlander retractors or other self retracting, elevators)
- Tourniquets (prefer single bladder with single hose, but can use double hose)
- Tourniquet box (prefer 220, but can use 110 with transformer)
- Esmark bandages
- Books and journals on CD/DVD (*FAI, JBJS*, etc.)
- New foot and ankle and orthopaedic books
- Sutures, absorbable and non-absorbable, for use in lower extremity (2-0 – 3-0 absorbable suture, 3-0 and 4-0 nylon suture, Fiber wire, large Ethibond, Vicryl, Prolene, etc.) (unexpired, if possible)
- Screw sets, instruments
- Kwires/Steinman pins
- Pin cutters
- Tendon anchors
- Drill bits, power drills and saws (with appropriate blades)
- Knee scopes and small joint arthroscopic equipment

Please do not bring dressing supplies, drapes, gloves, or scrubs.

"The items we use every day in our ORs are in short supply in the provincial hospitals and rehab centers where the teams will work," says Dr. Thomas. "Your donations of instruments and supplies for the project will be appreciated."

Research grants

continued from page 12

Application review process

Each year the AOFAS accepts grant applications from members, and the Research Committee conducts a blind review and ranks the proposals. Based on the committee's recommendations, the AOFAS Board of Directors awards one-year grants of up to \$10,000 with funding provided by member and corporate donations to the OEF and OREF. This year's Research Committee is currently reviewing eligible applications, and grant recipients and their research projects will be announced during the Specialty Day program on March 8.

The 2007-08 Research Committee members are: Samuel Flemister, Jr., MD (chair), George Arangio, MD, Christopher Bibbo, DO, Norman Espinosa, MD, David Kay, MD, Stuart Levine, MD, Sheldon S. Lin, MD (OEF Board representative), and Murray Penner, MD.

MEMBERSHIP MATTERS

2008 Dues – are you current?

To maintain ongoing operations the Society relies upon the timely payment of dues by its members. The AOFAS appreciates that the majority of AOFAS members paid their 2008 dues by the January 18, 2008 deadline, with an increased percentage over last year of those conveniently paying online. Payment ensures continued membership benefits through December 31, 2008 including subscription to *FAI* and access to the members-only side of the AOFAS Web site.

An automatic e-receipt is generated for all dues payments. If you did not receive a receipt for your records, please contact the AOFAS Executive Office.

For members whose dues payment is still outstanding, please contact the AOFAS Executive Office as soon as possible to discuss remaining payment options before March 1 to avoid suspension of benefits.

AOFAS growth in 2008

To ensure membership growth the AOFAS Membership Committee seeks to reach surgeons who are or will soon be focused on foot and ankle care and to introduce them to the benefits of AOFAS membership. A banner that links to the AOFAS Membership webpage now appears on the online *Wheeless' Textbook of Orthopaedics*. This site draws a full range of orthopaedic professionals, many of whom are in training or new to practice.

Recruitment and retention of members at all levels is ongoing. If you know of a non-member foot and ankle surgeon who would benefit from AOFAS membership and be an asset to the membership roster, please refer them to the Orthopaedic Foot and Ankle Professionals link found on the AOFAS Web site home page at www.aofas.org or have them contact Lois Bierman, Membership & Marketing Manager at lbierman@aofas.org or 847-384-4382.

The best referral to the Society comes directly from its members.

AOFAS increases e-mail communication

You may have noticed that more essential messages from the AOFAS are being delivered to you electronically. Indicated by most members as their preferred contact method, this form of communication is well suited for today's busy surgeon who multi-tasks to maintain a successful balance between professional and personal time.

The Society uses your e-mail address to send meeting confirmation letters, surveys, ballots, as well as receipts for dues payments, meeting registrations, and product purchases. Such receipts allow for accurate record-keeping that may help to facilitate tax credits and reimbursement.

The AOFAS does not provide member e-mail addresses to third parties. Your e-mail contact is accessed primarily by AOFAS staff for the purpose of conveying key information and requesting feedback on critical issues. AOFAS colleagues also have access to your e-mail address in the members-only online directory; you may notify the AOFAS Executive Office if you do not want your e-mail information provided in this manner.

If you have not received an e-mail from the AOFAS recently, you may be missing important information. Please be sure to keep your e-mail address current in your Member Profile. To prevent AOFAS messages from going into your SPAM folder, please consider adding the aofasinfo@aofas.org e-mail address into your e-mail address book. If you do not have an e-mail address that you access regularly please consider providing one that goes to an assistant or to your home so you don't miss out.

Member classification

To maximize your membership benefits, your AOFAS membership category needs to be current with your career status. The process of elevation from Resident Member to Fellow Member or Candidate Member to Active Member requires only a letter of request plus an updated CV once all criteria for the new category have been satisfied. Documents are reviewed by the Membership Committee and recommended for approval by the Board of Directors. This process is ongoing throughout the year.

For those completing their foot and ankle training, a full application is required by January 15 of the year immediately following completion of training to become a Candidate Member. Documents at this level are reviewed by the Membership Committee and the Board of Directors with their recommendation for approval by the voting members of the AOFAS at the next business meeting of the membership. All applications are due by January 1 for review at the Winter Meeting (Specialty Day) and by June 1 for review at the Summer Meeting.

If you are uncertain of your current classification or the membership level in which you should be categorized, please contact Lois Bierman, Membership & Marketing Manager: LBierman@aofas.org or 847-384-4382.

International Federation of Foot & Ankle Societies (IFFAS)

3rd Triennial Scientific Meeting
Sauípe, Bahia, Brazil
September 18-20, 2008

Visit www.iffas2008.com.br for complete meeting, registration, travel information, and abstract submission.

Abstract deadline extended to April 1.

