



# IN~STRIDE

## PRESIDENT'S MESSAGE



Keith L. Wapner, MD

Looking back at the *In~Stride* headline of Jim Brodsky's presidential column in 2006 – *AOFAS Renewed: How we are moving forward* – I am reminded of the ways our Society has advanced since that time.

A key success has been the role of AOFAS in reinstating the foot and ankle fellowship match. For a number of years there have been foot and ankle fellowship positions that did not fill, but the tide has turned. Applications for our fellowships are on the upswing and to date there has been a 40% increase in the number of applicants over last year. This is an exciting, positive sign for the future of our specialty. We have many excellent foot and ankle fellowship programs that offer training leading to successful careers focused on foot and ankle reconstruction, sports medicine, and trauma. The Fellowship Match Committee, previously chaired by Mike Aronow and now by Dan Farber, is to be congratulated for its leadership in developing consensus

and reinstating the match. Credit for the resident outreach programs that are now increasing knowledge and awareness of our specialty within orthopaedic training programs belongs to the Post-Graduate Education & Training Committee, chaired last year by Vinod Panchbhavi and now by Ben DiGiovanni.

On the education front, we are pleased to report that registration for one of the Society's premier courses – Surgical Complications of the Foot and Ankle – is running ahead of schedule. Chaired by Mark Myerson, this not-to-be-missed course will be held May 12-14 in Baltimore.

In another educational arena, the AOFAS and the AAOS are co-sponsoring two webinars this year: Forefoot and Midfoot Reconstruction (March 15) and Hindfoot Reconstruction (September 13). Our Education Committee, chaired by Greg Berlet, is also developing plans to offer a webinar on foot and ankle complications in the late fall.

Plans are in place for the AOFAS Annual Summer Meeting, chaired by Tom Lee, and the Pre-meeting Course on trauma, chaired by Roy Sanders, and we are looking forward to an exceptional educational experience in beautiful Keystone, Colorado. Companies

are looking forward to showing their products to you, and our expanded Exhibit Hall sold out six months in advance of the meeting.

We are also pleased to see the increase in foot and ankle content on Orthopaedia®, the online resource being developed with the Association of Bone and Joint Surgeons. I encourage you to participate and contribute.

The March issue of *AAOS Now* will include a roundtable discussion by AOFAS leaders on the technology overview on surgical treatment of ankle arthritis, which was approved by the AAOS Board in December. The roundtable invitation was issued to the AOFAS in response to comments provided to AAOS prior to approval of the document.

And finally, our website is getting a facelift as our staff moves forward with implementation of a new web content management system. This positive advance in the Society's technology infrastructure will offer a more engaging online experience for our members, the public and other website visitors. Watch for information on the launch of this upgraded site in March.

Keith L. Wapner, MD



## The Annual Summer Meeting welcomes you

Education – research – new technology – networking – and collegiality represent what registrants will experience when they attend the 27<sup>th</sup> Annual Summer Meeting in Keystone, Colorado.

"Keystone is perfectly suited to provide AOFAS members with an outstanding backdrop for our educational program," AOFAS President Keith Wapner, MD, says. "I welcome back those of you who attended our meetings in the past, and extend a warm welcome to all who will be attending for the first time."

The Program Committee has worked hard to develop a well rounded, diverse, and innovative program presented in a format that will allow attendees

to maximize opportunities to learn as well as share and network with colleagues and friends.

"Critical advances, research findings, and new technologies and techniques are all part of the educational experience," says Thomas Lee, MD, program chair. "We have developed a program that emphasizes faculty and attendee interaction using the latest in social media technology, as well as a program that expands participation on both the podium, at the computer viewing kiosks, and throughout the meeting venue."



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## New and returning meeting highlights

The Keystone program will consist of scientific paper presentations, guest speakers, research updates, symposia, electronic poster displays, and an Exhibit Hall full of the latest technical innovations and devices. Expanded podium presentations, a new course on improving practice efficiencies, a new research forum, and a new young physicians forum all promise to provide something for everyone.

- **NEW!** 2-minute rapid fire successive "speed-dating" presentations
- **NEW!** Enhanced evaluation and rating system for e-Posters
- **NEW!** Optional program: Improving Practice Efficiencies
- **NEW!** 'Green' paperless meeting
- **NEW!** Symposia and challenging debates
- **NEW!** Social media integration for active participation in educational sessions
- **NEW!** Research Forum
- **NEW!** Young Physicians Forum 'real world' program and reception
- Focused symposia and challenging debates
- Original paper presentations on clinical topics as well as basic science research
- Special award winning presentations and expanded discussion
- Electronic posters (e-Posters) with succinct step-by-step explanations of procedures, findings, and results of case studies
- Special guest speakers addressing topics on establishing surgical trials and innovations in clinical imaging
- CPT® Coding session given by experienced AOFAS Members
- Industry satellite symposia (non-CME programming)

## 2011 Exhibiting Companies

The AOFAS acknowledges the support of industry in helping to make the meeting a success. Meeting attendees are encouraged to interface with corporate colleagues throughout the meeting in the Exhibit Hall as well as in the informational satellite symposia sessions held on Wednesday, Thursday, and Friday.

This year marks a new first for the AOFAS Annual Summer Meeting. Keystone not only boasts the largest exhibit space AOFAS has had to date with 19,800 square feet, but the Exhibit Hall sold out six months in advance of the meeting. Look for the following companies represented in Keystone.

### Acumed LLC

Aetrex Worldwide, Inc.

Alimed, Inc.

AOFAS Outreach & Education Fund (OEF)

### Arterioocyte Medical Systems **NEW!**

Arthrex, Inc.\*

ArthroCare Sports Medicine

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### BioMimetic Therapeutics\*

Bledsoe Brace Systems\*

Carticept Medical, Inc.

Cropper Medical, Inc./BioSkin®

Data Trace Publishing Company

Del Palma Orthopedics **NEW!**

### DePuy Orthopaedics, Inc.\*

DJO Inc.\*

Esaote

Exactech, Inc.

### Extremity Medical, LLC\*

Foot Education LLC

Footmaxx™

Hapad, Inc.

Innomed, Inc.

Instratek, Inc.

### Integra™ \*

Lippincott Williams & Wilkins

Med Spec (ASO)

Medtronic Spinal & Biologics

Mile High Orthotics Lab, Inc.

### MMI – Memometal, Inc.\*

MTF Sports Medicine

Orthofix® Inc.\*

OrthoHelix Surgical Designs, Inc.\*

Orthopaedia®

Orthopaedic Research & Education

Foundation (OREF)

OrthoScan, Inc

OsteoMed® L.P.

Roll-A-Bout Corporation\*

SAGE

SBi – Small Bone Innovations, Inc.\*

### Smith & Nephew\*

### Stryker® Trauma & Extremities\*

Synthes® Trauma

### Tornier\*

TriMed®, Inc.

### Wright Medical Technology, Inc.\*

### Zimmer, Inc.

**Bold** *The AOFAS extends its appreciation to the companies providing commercial support for the Pre-meeting Course and the Annual Summer Meeting as of February 4, 2011.*

\* *The AOFAS and the Outreach & Education Fund (OEF) proudly recognize current Corporate Partners for their charitable donations to the OEF in support of research, educational outreach, and humanitarian service. Contributions and pledges have been made directly to the OEF or through designated gifts to the Orthopaedic Research & Education Foundation (OREF).*



AMERICAN ORTHOPAEDIC  
FOOT & ANKLE SOCIETY.

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### AOFAS 2010-2011 Board of Directors

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J. Chris Coetzee, MD, Member-at-Large

Stephen J. Pinney, MD, Member-at-Large

## Guest Lectures

### Research Guest Speaker

#### **Designing Fundable Trials In Foot And Ankle Surgery – Can They Be Done?**

Mohit Bhandari, MD,  
PhD, FRCSC  
Chair, Division of  
Orthopaedic Surgery  
Canada Research Chair  
in Outcomes Research  
Director, Musculoskeletal Trials Unit  
McMaster University  
Hamilton, Ontario, Canada



### Annual Kenneth A. Johnson

#### Memorial Lecturer

#### **Advances in Foot and Ankle Imaging and Imaging Guided Interventions**

James Linklater, MBBS  
(Hons), B Med Sci,  
FRANZCR  
Musculoskeletal  
Radiologist,  
Castlereagh Imaging  
Radiology Consultant, Asian Football  
Confederation  
Sydney, Australia



### Going green, staying connected

This meeting will go down in history as the first paperless Annual Summer Meeting for the AOFAS. Program material will be provided to attendees in advance in an electronic format; no printed material will be available on-site. The use of social media will further enhance the connectivity between meeting attendees. Attendees will be able to interact simultaneously with speakers during sessions and enhance meeting experiences through this information exchange. It will provide meeting participants with a forum to share their thoughts on anything and everything, while having access to unfiltered opinions and reviews of both experts and peers.



### Pre-meeting Course to focus on trauma

Chaired by Roy Sanders, MD, this year's pre-meeting course, **"The Treatment of Foot and Ankle Trauma in the New Millennium,"** will be held Wednesday, July 13.

"This dynamic and interactive case-based course will present a comprehensive and unique review of the most cutting edge options for treating hindfoot trauma," says Dr. Sanders.

Topics will include an in-depth analysis of the treatment controversies surrounding complex injuries to the hindfoot and ankle. Newer techniques in surgical treatment, a critical analysis of long-term functional outcomes, salvage procedures and their role in management of the post traumatic hindfoot, and complications and possible solutions will be addressed.

During the course of the day, attendees may also rotate through several non-CME industry satellite sessions on topics covered during the course, presented directly by participating OEF corporate partners.

### Invited Guests and Symposia Faculty

Mark J. Berkowitz, MD  
Michael P. Clare, MD  
John P. Ketz, MD  
J. Lawrence Marsh, MD  
Mark S. Myerson, MD  
Craig S. Radnay, MD  
Stefan Rammelt, MD, PhD  
Christopher A. Ritter, MD  
Arthur K. Walling, MD

### Session I: Treatment of the Complex Pilon Fracture

- Modern Surgical Approaches to the Pilon
- Fixation Techniques: Front Only
- Fixation Techniques: Back and Front
- Complications of Surgical Treatment
- Outcomes: Results of ORIF
- Outcomes: Should we even be operating?



### Session II: Complex Fractures of the Calcaneus

- Minimally Invasive Treatment of DIACFs
- Limitations of Minimally Invasive Fixation
- Complex Reconstruction: Tips and Tricks
- The Role of Primary Subtalar Fusion in DIACFs
- Wound Complications and How to Prevent Them
- Peroneal Tendon Dislocation: The Neglected Injury
- Results of Treatment: The Reality

### Session III: Case Presentations and Panel Discussions

- Treatment of the Post Traumatic Pilon Fracture
- Treatment of Failed and Non-operative Treated DIACFs
- Treatment of the Combined Post Traumatic Hindfoot



*Program and faculty subject to change*

*continued on page 4*



Credit - Denise Chambers/Weaver Multimedia Group



Credit - Vail Resorts Management Company



Credit - Vail Resorts Management Company



Credit - Vail Resorts Management Company



Credit - Matt Inder/Weaver Multimedia Group

## Social activities for mind, body, and spirit

All meeting attendees and their registered guests age 16 and over are invited to the Wednesday evening Welcome Reception. This event provides a relaxed meet-and-greet for colleagues, friends, and company representatives while enjoying light hors d'oeuvres and beverages. This is the perfect time to view the latest innovations in foot and ankle care and schedule more in-depth visits for Thursday and Friday.

On Thursday, Keystone's Executive Chef Steve Nguyen will serve up tips and tricks of the trade during a late morning Appetizer Demo Class. Enjoy

refreshments and collaboration during this 'how to' demonstration for making and garnishing seasonal appetizers.

As a prelude to Friday night's Annual Gala, the search is out for 'dream teams' to participate in the Keystone Adventure Race. Teams will compete in a series of relay races on land and water to be the first to cross the gala finish line and enter the party with a flourish.

The Annual Gala, *Western Roundup*, at the Keystone Stables will include an authentic Barn Dance, barbeque dinner, and more old west activities.

## A meeting site that is awe-inspiring

Surrounded by Colorado's majestic Rocky Mountains and set within thousands of acres of national forest, Keystone is a meeting site like no other. Fresh air, great views and countless opportunities for outdoor adventure await all who attend this year's Annual Summer Meeting.

Located due west of Denver, Keystone sits 9,300 feet above sea level. The closest major airport is Denver International Airport (DEN) and ground transportation options include rental car or shuttle. The picturesque drive from Denver is approximately 90 minutes and the Keystone Resort & Conference Center is just off Interstate 70. Parking is free at the resort and moving around the property is easy – either by foot or aboard the complimentary intra-resort shuttle.

Keystone holds the distinction as the largest conference venue in the Colorado Rocky Mountains. Its conference center is fully equipped with wireless internet allowing the AOFAS to make a major stride

in its 'Going Green' initiative. Keystone offers a variety of lodging opportunities – the Inn at Keystone and the Keystone Lodge provide a more traditional hotel environment while the Conference Village and River Run accommodations consist of condominium units. A variety of specialty shops, restaurants, and eateries are located throughout the property.

A day of learning is not complete without time for reflection, relaxation, or physical rejuvenation and all of this is within easy reach. Tee-off at one of Keystone's championship golf courses. Set off on bike, foot, or horseback along the trails of the Arapaho National Forest. Relax aboard a chairlift ride to the top of Dercum Mountain as you take in scenic views of the surrounding countryside. Catch some whitewater rafting action. No matter the time of day – there is always something to do, see, and enjoy within the alpine community.

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**Register for the meeting and book your hotel and transportation today at [www.aofas.org/summer](http://www.aofas.org/summer).**

## AAOS/AOFAS OKU 4: Foot and Ankle

*Michael Pinzur, MD, Editor*

This essential resource presents the most recent knowledge on foot and ankle injuries and conditions from the past five years and highlights today's most promising treatments and approaches. New features include more evidence-based data and discussions of the most modern and controversial techniques on total ankle replacements. It also includes expanded subject areas on ankle arthritis, fractures, and nonoperative treatment options, as well as an annotated reference list with summaries of key articles and levels of evidence.



List Price: \$179 • AAOS/AOFAS Members: \$129 • Residents: \$109  
[www.aaos.org](http://www.aaos.org) • Product no. 02990

## Specialty Day CME certificates:

All Specialty Day 2011 attendees must check in at the AAOS Registration Desk upon arrival in San Diego. The AAOS transcript system will not allow registrants to claim CME credit for any educational activity, including AOFAS Specialty Day, before officially checking-in with the AAOS.

CME Certificates for AOFAS Specialty Day participation may be printed at the CME kiosks located throughout the convention center. CME certificates will not be mailed to attendees. AOFAS members may view their CME transcript by logging on to [www.aaos.org](http://www.aaos.org) and [www.aofas.org](http://www.aofas.org).

## AOFAS Patient-Education Brochures

- Key take-home information for patients
- Highlights your qualifications
- Connects your practice with the AOFAS brand

Available to Active, Associate, and Candidate Members

Download order form:

[www.aofas.org](http://www.aofas.org)

Member login required



## EDUCATIONAL OPPORTUNITIES Current as of 1-31-11

**March 15, 2011**

**Webinar Course #3486: 7:15 pm – 8:45 pm (CST)**

**Forefoot and Midfoot Reconstruction: Is it Really THAT Complicated?**

Course Director: J. Chris Coetzee, MD

Sponsors: AAOS and AOFAS

Information and registration: [www.aaos.org](http://www.aaos.org)

**May 12-14, 2011**

**AOFAS SURGICAL COMPLICATIONS OF THE FOOT AND ANKLE COURSE**

Course Chair: Mark S. Myerson, MD

Baltimore Marriott Inner Harbor at Camden Yards

Baltimore, Maryland

Information and registration: [www.aofas.org/surgicalcx](http://www.aofas.org/surgicalcx)

**July 13-16, 2011**

**AOFAS 27<sup>th</sup> ANNUAL SUMMER MEETING**

Program Chair: Thomas H. Lee, MD

**July 13 Pre-meeting Course**

**The Treatment of Foot and Ankle Trauma in the New Millennium**

Course Chair: Roy W. Sanders, MD

Keystone Conference Center

Keystone, Colorado

Information and registration: [www.aofas.org/summer](http://www.aofas.org/summer)



**September 13, 2011**

**Webinar Course #3492: 7:15 pm – 8:45 pm (CST)**

**Focus on the Hindfoot**

Course Director: Bryan D. Den Hartog, MD

Sponsors: AAOS and AOFAS

Information and registration: [www.aaos.org](http://www.aaos.org)

**September 17-18, 2011**

**MASTERS EXPERIENCE: FOOT & ANKLE ARTHROSCOPY**

Sponsors: AANA and AOFAS

Orthopaedic Learning Center

Rosemont, Illinois

Information and registration: [www.aana.org](http://www.aana.org)

**September 21-24, 2011**

**IFFAS 4<sup>th</sup> TRIENNIAL SCIENTIFIC MEETING**

Nara Prefectural New Public Hall

Nara, Japan

Program Chair: Mitsuo Kinoshita, MD

Information and registration:

[www.secretariat.ne.jp/iffas2011](http://www.secretariat.ne.jp/iffas2011)



[www.aofas.org](http://www.aofas.org)

Visit often to view the most current program information

## Course on Surgical Complications to be held in Baltimore

Mark your calendar for the third bi-annual course on Surgical Complications, May 12-14, 2011, at the Baltimore Marriott Inner Harbor at Camden Yards. Under Course Chair Mark Myerson, MD, a faculty of experts, selected based on their willingness to share their good and bad experiences, will discuss why problems occur as well as what can be done to salvage them.

"The faculty will critically discuss why common and not-so-common problems occur during the didactic portion of the course, but the greater emphasis will be on discussion, case presentations, debates, and technique tips at the end of each session," says Dr. Myerson. "This is a meeting where nothing will be held back, and for the faculty, it is time for a little sweating under the spotlight."

### Topics to be explored include:

- The Hallux: Rigidus and valgus
- Nerve issues
- Lesser toes
- Trauma
- Diabetic foot and ankle
- Flatfoot
- Ligaments and tendons
- Cavus deformity
- Ankle fractures
- Ankle replacements

### Your turn:

Attendees are urged to bring difficult or challenging complications to share with the faculty during the case presentations and audience discussion portion of the program. Each case should be limited to four to five slides, including pre- and post-operative x-rays. Audience presenters will be given one minute for a short review of their case followed by panel discussion.

### Faculty:

Mark S. Myerson, MD, Course Chair  
Mark E. Easley, MD, Course Co-Chair  
Robert B. Anderson, MD  
Gregory S. Berlet, MD  
John T. Campbell, MD  
J. Chris Coetzee, MD  
Bryan D. Den Hartog, MD  
Steven L. Haddad, MD  
William C. McGarvey, MD  
Lew C. Schon, MD

For complete program and registration information visit [www.aofas.org](http://www.aofas.org). Advance registration fee savings available through April 25.

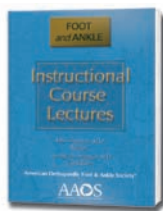
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## AAOS/AOFAS ICL Foot & Ankle

Elly Trepman, MD, Editor  
George A. Arangio, MD, Co-Editor

This new, specialized volume of practical expertise and surgical approaches addresses advances in the treatment of conditions of the foot and ankle.



The editors and a team of leading orthopaedic surgeons specializing in foot and ankle incorporate additional insight and current perspectives into each section by relating these selected lectures to daily clinical practice.

List Price: \$135  
AAOS/AOFAS Members: \$110  
Residents: \$95  
[www.aaos.org](http://www.aaos.org)  
Product no. 05073

## Applications for F&A fellowships up Resident outreach stimulates interest

Beginning in spring 2010, the AOFAS implemented several new resident outreach programs – Resident Scholarships, Visiting Professor Program, and Resident Review Course – with the goal of increasing interest in foot and ankle orthopaedics. These new programs, developed by the Society's Post-Graduate Education & Training Committee, are supported with donations from industry and members to the OEF and their impact on fellowship applications is being closely tracked.

The AOFAS is pleased to report a 40% increase so far this year in the number of applicants for foot and ankle fellowship positions. As of February 1, a total of 74 applications have been received for the 2011 match, compared to a total of 53 applications received for the 2010 match. There are 58 positions offered by 36 fellowship programs in this year's match. This year's applicants include residents who attended the 2010 AOFAS Annual Summer

Meeting as Resident Scholars and residents who attended one of the Visiting Professor Programs or the Resident Review Course. The AOFAS has also experienced an increase in the number of applications for Resident Membership.

The deadline to submit an application for the AOFAS-sponsored Orthopaedic Foot & Ankle Fellowship Match Program is March 1. Programs may conduct interviews through March 25. The deadline for applicants and programs to submit their rank lists to the San Francisco Match is March 29 (Noon, PST). Match Day is April 5, 2011.

The application process for the AOFAS-sponsored Orthopaedic Foot & Ankle Fellowship Match Program is administered by AOFAS staff and the matching process is handled by the San Francisco Matching Program. For further information on fellowships visit [www.aofas.org](http://www.aofas.org).

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## Visiting Professor Program



Robert Anderson, MD



James Brodsky, MD



Steven Ross, MD



Charles Saltzman, MD

A special *thank you* to the four past presidents who are busy spreading the word to orthopaedic residency training programs across the country about the merits, benefits, and satisfying career choice foot and ankle offers:

- Robert Anderson, MD
- James Brodsky, MD
- Steven Ross, MD
- Charles Saltzman, MD

Drs. Anderson and Ross completed seven visits in 2010, reaching more than 100 residents. Visits included: The Medical College of Georgia, Augusta; Louisiana State University, New Orleans; Montefiore Medical Center, New York; Temple University, Philadelphia; and Tufts Medical

Center, Boston. Dr. Anderson has two additional visits scheduled this spring for the University of Virginia, Charlottesville and San Antonio Military Medical Center, Texas.

The program advances the Society's educational mission by exposing residents to renowned AOFAS orthopaedic foot and ankle surgeons who present lectures on cutting-edge foot and ankle surgery and participate in clinics, grand rounds, and networking dinners.

Host guidelines and applications are at [www.aofas.org](http://www.aofas.org). For more information contact Peggy Reilly, Outreach Programs Manager, at [preilly@aofas.org](mailto:preilly@aofas.org) or 847-384-4379.

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## Resident Scholar Applications due March 1

Following its successful launch in 2010, the Resident Scholarship Program is now open to competitively selected PGY2 and PGY3 orthopaedic residents with an interest in foot and ankle surgery. Recipients will attend the Annual Summer Meeting in Keystone, Colorado July 13-16.



Vail Resorts Management Company

The scholarship covers registration fees for the Pre-meeting Course, Annual Summer Meeting, Young Physicians Forum, four nights lodging, and a transportation stipend. This is an excellent opportunity to learn more about foot and ankle surgery and network with AOFAS members.

Encourage residents to apply today! **March 1, 2011 is the deadline.** The application form is available at [www.aofas.org](http://www.aofas.org). For more information contact Peggy Reilly, Outreach Programs Manager, at [preilly@aofas.org](mailto:preilly@aofas.org) or 847-384-4379.

## Thank you for donating to the OEF

### Sharing knowledge...changing lives...growing for the future

In calendar year 2010 members and interested individuals generously contributed to the AOFAS Outreach & Education Fund (OEF). The OEF is the separate funding organization that supports important AOFAS programs in research, educational outreach, and humanitarian service.

Contributions were made directly to the OEF or to the Orthopaedic Education & Research Foundation (OREF) with a designated gift to the OEF.

Thank you to all who generously donated to support the OEF. Your participation helps ensure continued success. Each person and each contribution make a difference.

	Individual OEF donations via OREF	Individual OEF direct donations
2010	\$44,005	\$61,593
2009	\$37,850	\$65,520

## Thank you to OEF supporters

The OEF continues to support the mission of the AOFAS through generous donations from both corporate and individual donors. The field of foot and ankle orthopaedics has been improved by scientific research. Humanitarian service has enhanced the lives of both AOFAS volunteers and those who benefit from their care. Young AOFAS members have exchanged knowledge with experienced orthopaedic foot and ankle surgeons as they traveled to major teaching, clinical, and research centers. Residents received scholarships to attend the Annual Summer Meeting to learn about foot and ankle surgery.

### OEF individual donors

The AOFAS and OEF gratefully acknowledge the following individuals for their charitable donations to the OEF. The information below reflects donations made between January 1, 2010 and December 31, 2010, either directly to the OEF or to the OREF with a designated gift to the OEF.

#### President's Circle – Platinum \$100,000 and above

#### President's Circle – Gold \$50,000 - \$99,999

#### President's Circle – Silver \$25,000 - \$49,999

Mark S. Myerson, MD

#### President's Circle – Bronze \$10,000 - \$24,999

Matthew and Susan K. Lyons Family Foundation

#### President's Circle – Donor \$5,000 - \$9,999

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Gregory C. Berlet, MD  
Jonathan T. Deland, MD  
Thomas H. Lee, MD

#### Friend \$1,000 - \$4,999

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The AOFAS and OEF gratefully acknowledge gifts received. Be assured that every effort is made to avoid errors; however, an error may occur during production. If your name has been accidentally omitted or reported incorrectly, please accept our sincere apologies and notify us of the change.

### Using CPT® modifiers to clarify services

by the AOFAS CPT/RUC Committee

A CPT modifier is a two-digit code used to report or indicate that a service or procedure performed has been altered by some special circumstance but has not changed in its definition or code.

Modifiers are used to clarify services reported, respond to payment policy requirements, protect your reimbursement, and help prevent claim delays and denials. The following is a select group of commonly used modifiers that the AOFAS CPT/RUC Committee recommends be used, when appropriate, to ensure correct reporting and subsequent payment when there is a change in the delivery of a coded service.

#### SURGICAL MODIFIERS

##### 22 Increased procedural services

The 22 modifier is used when the work to provide a service is substantially greater than is typically required. Documentation must support the additional work and the reason, such as increased intensity, time, technical difficulty of procedure, or severity of the patient's condition.

Example: The 22 modifier has been used to report surgery performed on a patient with Body Mass Index >30.

##### 50 Bilateral procedure

This modifier is used to identify a procedure that has been performed bilaterally (e.g., same body part, separate side) at the same session. When doing bilateral surgery, the code should be listed with the 50 modifier and charged at a rate of 150% of the single procedure.

Example: The same patient has both his/her left and right ankle aspirated in the same operative session. This would be reported as 20605 50.

##### 51 Multiple procedures

The 51 modifier is added when multiple procedures, other than evaluation and management (E/M) services, are performed at the same session by the same provider. The primary procedure should be listed first and the 51 modifier added to each subsequent procedure code. Additional procedures are generally discounted by 50%.

##### 57 Decision for surgery

This modifier is used to report an E/M service that resulted in the initial decision to perform a surgery. It protects the initial encounter code by indicating that the E/M code is to be covered separately from the surgical code because the global periods for surgery normally include patient encounters

both the day before and the day of surgery.

Example: You are called to the emergency room to consult on a patient with a trimalleolar fracture late in the evening and after your evaluation, you decide to perform surgery the next morning. You would code the ER consultation as 99244 57 and the ORIF surgery as 27823. Without the 57 modifier, the surgical procedure would be covered but the consult visit in the ER the previous evening would not. The 57 modifier should also be used when seeing a patient in the office and scheduling the patient for surgery the following day.

##### 58 Staged or related procedure or service by the same physician during the postoperative period

This modifier is used to indicate a staged procedure or a more extensive procedure planned in advance. Subsequent procedures done during the global period are reported with this modifier. It is especially useful in diabetic amputations.

Example: One month after a great toe amputation the patient's foot gets worse and the procedure needs to be converted to a transmetatarsal amputation. In this case the 58 modifier would be used to indicate that the patient's condition has changed due to advancement of disease, rather than a complication. Full coverage would be expected.

##### 59 Distinct procedural service

This modifier is used to indicate a distinct service performed on the same day by the same provider. The 59 modifier should be used for services that would typically be considered bundled. Examples include separate lesions requiring separate surgeries, different sites or organ systems, or separate injuries.

When reporting services with the 59 modifier it is important to link the separate services to separate ICD-9 diagnostic codes. Reimbursement for procedures/services reported with a 59 modifier are the same as reimbursement for multiple procedures with a 51 modifier (e.g., typically 50% of the first code).

Example: Debridement of an open fracture of the right calcaneus and debridement of an open fracture left ankle are performed in the same operative session. You would code the first with CPT code 11012 and the second with CPT code 11012 59. The modifier 59 indicates that both services are distinct and are to be covered as separate services.

Note: When hammertoe surgery, CPT code 28285, is done in addition to bunion surgery, the 59 modifier works better than

the 51 modifier because it allows the payer to recognize the two procedures are for distinct injuries or conditions.

#### OFFICE MODIFIERS

##### 24 Unrelated E/M service by the same physician during a postoperative period

This modifier is used to indicate that an E/M service was performed during a patient's postoperative period for a reason unrelated to the original procedure.

Example: One month after a patient has a tarsal tunnel release on the right side, the patient is seen with gout in his/her left foot. The 24 modifier would be added to the appropriate E/M code to indicate a separate unrelated service on the left foot.

##### 25 Significant, separately identifiable E/M service by the same physician on the same day of the procedure or other service

This modifier is used to indicate an E/M service performed on the same day as another procedure/service but for a separately identifiable reason. If a patient is being seen for one injury/condition but has a second, distinct injury/condition that requires your efforts to evaluate and manage, you would code both services, but use the 25 modifier for the evaluation and management service. It is essential that you provide separate ICD-9 diagnostic codes for each injury/condition.

Example: You are seeing a patient to perform an injection of the left, first MTP joint. At the visit, the patient indicates he/she is having pain in the right foot. You would code the left MTP injection as 20600 and the evaluation and management of the right foot as a Level 3 consultation - 99243 25 with distinct ICD-9 codes for each injury/condition.

#### TOE MODIFIERS

Use the CPT Level II (HCPCS/National) Modifiers when you operate on a toe; add another modifier if needed.

- TA Left foot, great toe
- T1 Left foot, second digit
- T2 Left foot, third digit
- T3 Left foot, fourth digit
- T4 Left foot, fifth digit
- T5 Right foot, great toe
- T6 Right foot, second digit
- T7 Right foot, third digit
- T8 Right foot, fourth digit
- T9 Right foot, fifth digit

Reference: CPT® 2011, American Medical Association

## MEMBERSHIP MATTERS

### 2011 Dues

Annual due notices were mailed in late November and by the February 1 payment date, more than 60% of members had paid; most did so conveniently online. To obtain your AOFAS login and online payment instructions, please write to [aofasinfo@aofas.org](mailto:aofasinfo@aofas.org).

If you did not receive your dues notice in the mail or need to discuss payment options or your current membership category, please contact Lois Bierman, Director of Membership & Marketing, at [LBierman@aofas.org](mailto:LBierman@aofas.org) or 847-384-4382 as soon as possible so there is no interruption in your member benefits.

Members in the process of elevating will be invoiced at their new membership

category rate in late February and have an extended due date. Note that Fellow Members in a fellowship program that participated in the AOFAS-sponsored match will have their 2011 dues paid by a grant provided by the OEF. Fellow Members who completed training in a program that participated in the AOFAS-sponsored match and apply to elevate to Candidate Membership or International Membership will have 50% of their 2011 dues paid by an additional grant from the OEF.

New members will be billed for their 2011 dues in late February and have an extended due date pending a final vote of approval during the Business Meeting held during Specialty Day on February 19, 2011.

### *Thank You* to AOFAS members who ...

- Paid their 2011 annual dues by the February 1 deadline
- Signed up for the new option for auto renewal of their dues plus an OEF donation
- Sponsored a new member applicant
- Provided an updated work and/or preferred mailing address to keep their member profile current
- Added their website to their AOFAS profile and/or added a link to the AOFAS from their website
- Updated their AAOS online directory listing to include foot and ankle as an anatomical specialty

### In Memoriam

Andrew B. Weiss, MD (71)  
Active Member  
October 2010  
Roseland, NJ

### Have you moved?

Mailing labels for *FAI*, *In~Stride*, and other AOFAS materials are prepared up to 4 weeks in advance.

If you have recently relocated or will be moving soon and have not yet updated your Member Profile, contact [membership@aofas.org](mailto:membership@aofas.org) to request changes or login to your record online

and submit edits. Please allow up to two business days for edits to be made.

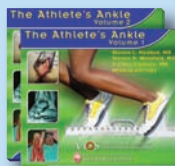
Even if your home address is your preferred mailing address, please also keep your work information current as it is made available to the public and is used for approved mailing list rentals.

**The best referrals come from members.** If you know an orthopaedic foot and ankle surgeon who is not yet an AOFAS member, please have them contact Lois Bierman, Director of Membership & Marketing, at [LBierman@aofas.org](mailto:LBierman@aofas.org) or 847-384-4382. The next application deadline is June 1, 2011.

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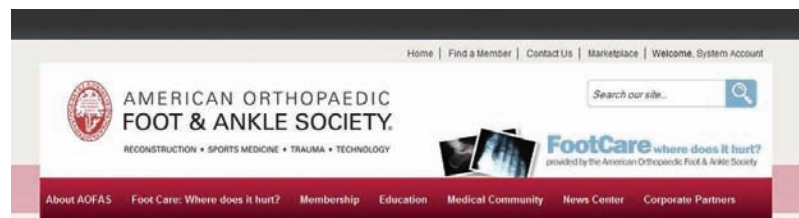
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New features that will enhance member and public usability include:

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