PRESIDENT’S PERSPECTIVE

Dear Colleagues,

It’s hard to believe that I have reached the final of my four President’s Perspectives for In-Stride. This year has afforded me a unique view of our extraordinary organization. While I have many meaningful things that I can share with you, my most meaningful message is this: Confidence. I am confident that our organization will continue as the leader in foot and ankle and will only grow stronger in this role. Let me elaborate …

The AOFAS Board of Directors serves you well as a collaborative team dedicated to looking out for your best interests. Time and again I am comforted by our leadership’s commitment to putting our membership’s needs before any personal agenda. I am confident that President-Elect Jeffrey Johnson and this tremendous group of role models will instill the same values in our future leaders.

The AOFAS staff in Rosemont, Illinois: What an asset! Our administrative team has been successful in continuing the initiatives set by Zan Lofgren and introducing new ones. I am confident that Susan Oster will take our Society to new heights, not only providing top-tier service to our membership but also enabling our talented staff to reach their potential in serving the AOFAS.

With our organization’s commitment to providing the most comprehensive and accessible educational resources, there is no doubt the AOFAS will continue as the leader in foot and ankle education. Thanks in large part to Lew Schon’s dedication, the recently launched Physician Resource Center (PRC) promises to emerge as the premier online resource for foot and ankle knowledge. David Thorodarson, Jim Brodsky and the FAI/Managerial Board continue to raise our journal’s impact factor, and the overwhelming number of submissions has prompted our organization’s soon-to-be-released open access journal, Foot & Ankle Orthopaedics™.

Meanwhile, April’s Advanced Foot and Ankle Course in Cleveland, Ohio, chaired by Hodges Davis and Mark Glazebrook, and July’s AOFAS Annual Meeting, chaired by Selene Parekh, and Pre-meeting Sports Course, chaired by Ned Amendola, in Toronto, Ontario, Canada, carry on the tradition of the AOFAS’ premier foot and ankle meetings. And Charlie Saltzman with Ms. Oster …

AOFAS will continue to have an impact on orthopaedic research and serve as a role model for other societies for years to come.

— Mark E. Easley, MD

AOFAS Annual Meeting 2016

Metro Toronto Convention Centre
Toronto, Ontario, Canada

Pre-meeting Course
Wednesday, July 20

Annual Meeting Scientific Sessions
Thursday – Saturday, July 21-23

Join friends and colleagues when AOFAS Annual Meeting 2016, the premier event for orthopaedic foot and ankle specialists, convenes in July. The week promises to deliver an engaging program that combines the best in education, the latest in technology and the opportunity to network with attendees from around the world.

Program Chair Selene Parekh, MD, MBA, and the AOFAS Program Committee have assembled an outstanding scientific program, while

local hosts Timothy Daniels, MD, and Johnny Lau, MD, have selected events to showcase Toronto.

There will also be opportunities outside of the CME program for hands-on exposure to state-of-the-art techniques in industry symposia. Highlights of the scientific and social program follow; make your reservations now to attend this global gathering!

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In Memoriam

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are leading the International Federation of Foot & Ankle Societies (IFFAS), continuing the AOFAS’ positive influence on educational initiatives worldwide. I am confident that our organization will continue to serve health care providers and patients with the most valued resource for best-practice foot and ankle education.

AOFAS and Foundation efforts have elevated our Society to a leader in research initiatives among orthopaedic subspecialties. Dan Latt and the AOFAS Research Committee have been innovative in supporting meaningful research among our membership, creating sustainable avenues to fund advanced research projects and providing seed money to new ones. Ken Hunt, who heads our organization’s Orthopaedic Foot & Ankle Outcomes Research (OFAR) network, put it best: “We used to have a magnifying glass on our research efforts. Now we have a spotlight.” By developing a clear vision for our Society’s research, AOFAS has been successful in garnering essential membership and industry support. I am confident the AOFAS will continue to make a recognized impact on orthopaedic research that will serve as a model for years to come.

The big picture is also bright. I am delighted to report that the AOFAS is well-represented on the national front. The Society is a leader in the AAOS Board of Specialty Societies, is well-positioned in CPT/RUC initiatives, has increased membership in the American Medical Association, and has strong support from our representatives in Washington, D.C. We are fortunate to have dedicated volunteer members, including Mike Aronow, Alexe Page, Tye Ouzounian, Pete Mangone and recently appointed John DiPretta and Aaron Gayer (to name a few), who continue to represent us well beyond our immediate Society. Having recently attended the National Orthopaedic Leadership Conference, I am confident in stating that the AOFAS is well positioned among its peers.

Membership is on the rise, including international membership, thanks in large part to Becky Cerrato, chair of the AOFAS Membership Committee, and the tireless support from our membership staff. The AOFAS and our subspecialty continue to become more popular. We just completed another successful foot and ankle match with a healthy number of orthopaedic residents paired with our many orthopaedic foot and ankle fellowship programs. We had a record number of Resident Scholarship Program applications this year, forcing us to turn some applicants away and encouraging them to re-apply next year. With numerous existing and a healthy complement of new and improved AOFAS benefits, I am confident that our membership will grow considerably over the next several years.

I urge you to share my confidence in our Society. Join a committee. Volunteer your time and talent. Contribute to Campaign 50. As Bryan Den Hartog, president of the Foundation Board of Directors, has emphasized, your financial contributions will support our Society’s unparalleled role as the worldwide leader in research, education and service.

Respectfully,
Mark E. Easley, MD

We just completed another successful foot and ankle match and had a record number of Resident Scholarship applications.
Submit abstracts now for Specialty Day 2017

The AOFAS Program Committee invites you to submit an abstract for presentation at AOFAS Specialty Day 2017 slated for March 18 next year in San Diego, California.

The abstract submissions site closes June 1 at 11:59 pm Central Time. Abstracts must be submitted electronically at http://aagapps.com/aofas/ and completed prior to the deadline. Each presenter must set up an account within the system to submit the required documentation.

Submissions will be reviewed by the Program Committee in a blinded fashion, and notifications will be sent in mid-July. Abstracts will be considered in the following categories for scientific paper presentations:

- Ankle
- Ankle Arthritis
- Arthroscopy
- Basic Sciences/Biologics
- Bunion
- Diabetes
- Hindfoot
- Lesser Toes
- Midfoot/Forefoot
- Sports
- Trauma

There is a 500-word limit for the submission, and one figure or table may be included with the text. The submitting author will serve as the corresponding author for all notifications, and each author will be required to complete disclosure of conflicts of interest.

Specialty Day 2017 information will be available in early fall, and registration will be managed by the AAOS.

Questions about your membership status and related benefits should be directed to membership@aofas.org.
More than 600 surgeons participated in AOFAS Specialty Day 2016 when the one-day meeting convened March 5 in Orlando, Florida. The program opened with symposia on bunion surgery and new procedures for plantar plate tears, floating toe, posterior tibial tendon and spring ligament repair.

A unique session entitled “What Else Can I Do With My MD?” allowed presenters to discuss how their physician training influenced their other roles as entrepreneurs, venture capitalists, innovators, media personalities and politicians.

The day featured 13 scientific papers on basic science and clinical topics, including hallux valgus, Lisfranc injuries, Achilles tendon rupture, ankle arthroplasty and patient-reported outcomes instruments.

“The program was developed with both the specialist and generalist in mind, and with the hope of adding some new twists and thought-provoking speakers,” says Selene Parekh, MD, MBA, Specialty Day Program Chair. “The goal was to debate controversies and discuss what’s new while continuing the tradition of providing a forum for discussion and exchange.”

The afternoon program featured symposia on complications; opposing viewpoints on operative vs. nonsurgical treatment of calcaneal fractures, Achilles tears and Jones fractures; and a spirited look at controversies, including management of failed peroneal and Achilles repairs, use of placental tissues and 3D printed implants.

“Specialty Day is an early year opportunity for AOFAS members and our AAOS colleagues to focus on foot and ankle on the last day of a busy week,” says Mark Easley, MD, AOFAS President. “This year we included a number of our international colleagues to share their expertise. The program gave a taste of what is planned for AOFAS Annual Meeting 2016 in Toronto, Ontario, Canada, in July, where we hope to see everyone.”

New this year, the meeting offered box lunches with non-CME presentations from industry sponsors. AOFAS gratefully acknowledges support from Arthrex, Integra LifeSciences and Wright Medical Technology, Inc.
Specialty Day 2016 offers unique programming

Photos by Paul Docktor, MD
Sports Pre-meeting Course

The week’s educational programming will open on Wednesday with the Pre-meeting Course focused on sports. Chaired by Ned Amendola, MD, this dedicated day will include symposia and scientific papers, and will provide the opportunity to learn and discuss with the experts in an interactive meeting format.

“We will address controversies, hold debates and discuss common and difficult issues in the athletic population,” says Dr. Amendola. “The Highlight Symposium will address difficult problems in high-level athletes.”

Annual Meeting Scientific Program

The Annual Meeting programming will run Thursday through Saturday with 17 symposia, more than 100 scientific papers, ePosters and invited guest lectures. “With a record number of submissions, the Program Committee faced a challenge in selecting the papers,” says Program Chair Selene Parekh, MD, MBA. “As with Specialty Day held in March, the goal has been to offer some new content and opportunities this year. We will hold debates on controversial topics in a March Madness format and offer some foot and ankle presentations in the style of the popular TED Talks. Also, a number of international colleagues will speak on symposia presenting what’s new in Canada, South America, Europe and Asia.”

This meeting has become the global gathering place to discuss orthopaedic foot and ankle care and network with colleagues from around the world. “Another cornerstone of this year’s meeting will be to hear from our leaders, innovators and past presidents,” says Mark Easley, MD, AOFAS President. “I hope their insights will inspire our younger members to advance the specialty in the future and improve patient care.”

Focus on research

Research will be presented throughout the meeting within the scientific program, Wednesday’s Research Forum, Thursday morning’s Invited Research Lecture and Friday’s Research Grants Session. The AOFAS Research Committee, chaired by L. Daniel Latt, MD, PhD, has invited Regis O’Keefe, MD, PhD, as the Research Guest Lecturer. He will address “Osteoarthritis: Impact and Current and Future Treatments.” The Research Forum will discuss how to develop, fund and maintain a research program, and the Friday session will highlight past AOFAS research grant winners and their work.

New! Concurrent sessions

New this year, Friday afternoon will offer concurrent sessions to allow attendees to personalize their learning. Select from several options: Ask an Expert session, Humanitarian Service Outreach program, Research Grants program or the new Orthopaedic Resident Session (some restrictions apply).

Industry connections

Visit the Exhibit Hall to learn about the latest in new devices and technologies. The hall opens Wednesday evening and closes Friday following lunch in the hall. Also within the hall you will find the ePoster viewing kiosks and areas to complete the meeting evaluation and claim CME.

Optional industry satellite symposia provide another way to discover what’s new from industry. Check out these non-CME programs:

Industry Satellite Symposia (as of 4-13-2016)

**Wednesday, July 20**
9:10 – 10:40 am and 1:00 – 2:30 pm
DJO Global
Stryker (mobile lab)
Wright Medical Technology, Inc. (mobile lab)

**Thursday, July 21**
1:30 – 3:30 pm
Integra LifeSciences (mobile lab)
Stryker (mobile lab)
Wright Medical Technology, Inc. (mobile lab)
Zimmer Biomet

**Friday, July 22**
6:30 – 8:00 am
Amniox Medical
DePuy Synthes
Integra LifeSciences (mobile lab)
Stryker (mobile lab)
Wright Medical Technology, Inc. (mobile lab)
Zimmer Biomet

Air or ground travel assistance

Ms. Tomi Gaudio, Progressive Travel
tomi@progressivettravel.net
844-250-8764 (Toll Free)
847-348-3600 (extension 6)
847-398-7299 (Direct: 24/7)
**Registration update**

Attendees are encouraged to register in advance – by June 22 – for $100 savings and to avoid long lines at Onsite Registration in Toronto. Advance registrants will have all registration materials awaiting their arrival at the Advance Registration counters beginning Tuesday afternoon.

Registrants are required to wear name badges for admission to all educational programming, industry sessions, the Exhibit Hall and AOFAS social functions. Seating may be limited for some optional programming.

A program is in place to cover the educational program fees for U.S. members in active military service who are denied reimbursement by the government for this educational event. This program is also available to non-member orthopaedic residents in active military service. For more program specifics and the fee waiver application form write to membership@aofas.org.

**Onsite Registration**

Metro Toronto Convention Centre
Level 300

**Tuesday, July 19**
4:00 pm – 8:00 pm

**Wednesday, July 20**
6:00 am – 8:00 pm

**Thursday, July 21**
5:30 pm – 5:00 pm

**Friday, July 22**
6:00 am – 3:00 pm

Direct all general meeting registration questions to registration@aofas.org in advance of the meeting dates.

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**AOFAS Annual Meeting 2016 Schedule**

Plan to participate in the full educational experience beginning with the Pre-meeting opening Wednesday morning and concluding with the final scientific presentations on Saturday morning. Earn up to 25.5 AMA PRA Category 1 CME® credits when you attend the Pre-meeting Course, Annual Meeting Scientific Session and the Research Forum. Industry sessions are not part of the CME program. Details subject to change.

**Wednesday, July 20**
6:45 am Pre-meeting Course Session 1
9:15 am Industry Satellite Symposia
10:50 am Pre-meeting Course Session 2
1:05 pm Industry Satellite Symposia
2:40 pm Pre-meeting Course Session 3
4:15 pm Research Forum
6:00 pm Welcome Reception
7:30 pm Resident Scholar / Mentor Dinner (by invitation)
8:00 pm International Dessert Reception (by invitation)

**Thursday, July 21**
6:45 am Scientific Session
10:15 am Break / Visit Exhibit Hall
11:00 am Scientific Session
1:30 pm Industry Satellite Symposia
3:30 pm Scientific Session
5:30 pm Young Orthopaedic Surgeons Forum & Reception (optional)
6:00 pm Foundation Donor Reception (by invitation)

**Friday, July 22**
6:30 am Industry Satellite Symposia
8:00 am Scientific Session
9:35 am Break / Visit Exhibit Hall
11:40 am AOFAS Business Meeting (Active Members only)
11:55 am Lunch in Exhibit Hall
12:55 pm Scientific Session
2:30 pm Ask an Expert - Bring Your Problem Cases (optional)
2:30 pm Humanitarian Services Outreach Session (optional)
2:30 pm Orthopaedic Resident Session (optional)
2:30 pm Research Grants Session (optional)
4:30 pm FAI Reviewers and Associate Editors Meeting / Reception (by invitation)
6:00 pm Home Run Gala: Rogers Centre Ballpark (optional ticketed event)

**Saturday, July 23**
6:45 am Scientific Session
10:10 am Scientific Session
12:30 pm Meeting Adjourns

For program details and registration information refer to the Annual Meeting brochure available on the Program page at www.aofas.org/annualmeeting.

Use Twitter to promote the meeting and comment on what you learn! Use the hashtag #feet2016.

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Social events
Take advantage of the special events planned for the week that offer you time to catch up with old friends and make some new ones. These activities also provide just the right environment to introduce your guests and families. Be sure to include the Welcome Reception and Gala in your schedule.

Welcome Reception
Wednesday, July 20 – 6:00 – 8:00 pm
AOFAS Exhibit Hall
Open to all registered meeting attendees and registered spouses / guests. Spend the early evening walking through the aisles and visiting new and returning exhibitors, make appointments for later discussion and enjoy beverages and light appetizers before you head out to dinner on your own. Minimum age in the Exhibit Hall is 16.

Home Run Gala
Friday, July 22 – 6:00 – 10:00 pm
Rogers Centre Ballpark – Rain or Shine
Toronto Blue Jays vs. Seattle Mariners Baseball Game
Come one, come all to cheer on your favorite team. This year’s event will be unique, whether you’re the serious baseball fan that enjoys the intensity of the game or the fan that enjoys a more relaxed setting where you can engage in conversation with friends and colleagues. Whichever your style, this year’s Home Run Gala has it all.
Choose Individual Stadium Seating (200 Level) or the Special Event Suite (500 Level). The vantage point from either location will be the same – overlooking the third base line. Those watching from the Suite will enjoy a relaxed buffet dinner and those nestled in a Stadium Seat can choose from a wide range of food and drink vendors using a pre-paid voucher.
This ticketed event is open to all meeting and industry attendees and their spouses / guests. More event and fee information may be found on the Social Events page at www.aofas.org/annualmeeting.

Housing and travel
Book your hotel and arrange for travel now! Toronto is ranked seventh in the top 52 places to go in 2016 (New York Times, January 2016) and is listed in the Top 10 of the most culturally diverse cities in the world (CNBC, May 2015).
Access online reservation links and view hotel information at www.aofas.org/annualmeeting (Housing and Travel page).

Travel information from outside Canada
Government documentation is the responsibility of each traveler, children included. Find out what you need to visit Canada as a tourist and what documents you need to carry with you. Carefully review all information provided by the Government of Canada, especially on the homepage and under the Travel tab at www.cic.gc.ca/english/visit. View today so you have ample time to obtain all required documents.

Passport reminder to enter/depart Canada: Your passport must not have an expiration date within six months of July dates of travel. Check your expiration date now and renew immediately if necessary.

Questions?
Contact the AOFAS Executive Office with any questions as you register for the meeting, optional programs and social activities. Phone 800-235-4855 or 847-698-4654 (outside U.S.) to reach staff. The AOFAS Executive Office is open 8:30 am – 5:00 pm (Central Time), Monday through Friday.

Save $100 when you register by June 22!
www.aofas.org/annualmeeting
Annual Meeting 2016 – Product Showcase

Make the most of your time in the AOFAS Exhibit Hall by creating a must-see priority list. Add the exhibitors below to your list, and be sure to stop in throughout the meeting, starting with Wednesday night’s Welcome Reception and closing with Friday’s lunch in the hall.

**WRIGHT MEDICAL TECHNOLOGY, INC.**

*The only low-profile, talar-resurfacing ankle with preoperative navigation.*

Learn more at BOOTH #119

**ZIMMER BIOMET**

*Technology that moves.*

Learn more at BOOTH #501

**WRIGHT MEDICAL TECHNOLOGY, INC.**

*Your comprehensive choice for limb salvage solutions.*

Learn more at BOOTH #119

**BIOPRO, INC.**

*The patient preferred method for treating Hallux Limitus/Rigidus...* In a recent study, patients showed higher overall satisfaction with a BioPro® First MP Hemi implant than joint arthrodesis...

Learn more at BOOTH #108

**CARESTREAM HEALTH, INC.**

*Experience the power of an on-site CT System.*

Learn more at BOOTH #213

**PLANMED, INC.**

*Planmed Verity® In-office extremity CT*

Learn more at BOOTH #636

**WRIGHT MEDICAL TECHNOLOGY, INC.**

*The first and only proven alternative to autograft in ankle and hindfoot arthrodesis.*

Learn more at BOOTH #119

**CURVEBEAM LLC**

*THE NEW STANDARD IN CT IMAGING*

Learn more at BOOTH #609

**WRIGHT MEDICAL TECHNOLOGY, INC.**

*The only preoperative navigation system for total ankle replacement.*

Learn more at BOOTH #119
Mark your calendar now for these upcoming programs

COURSES, MEETINGS AND WEBINARS

June 14, 2016 • Rosemont, Illinois
AOFAS LIVE WEBINAR: GRAND ROUNDS: MODERATE TO SEVERE BUNION CORRECTION
Moderator: Thomas Lee, MD
www.aofas.org/webinars

July 20-23, 2016 • Toronto, Ontario, Canada
AOFAS ANNUAL MEETING 2016
President: Mark Easley, MD
Program Chair: Selene Parekh, MD, MBA
Sports Course Chair: Ned Amendola, MD
www.aofas.org/annualmeeting

October 14-15, 2016 • St. Louis, Missouri
COMPLETE FOOT CARE COURSE
Course Chair: Jeremy McCormick, MD
www.aofas.org/completefoot

October 16-17, 2016 • OLC • Rosemont, Illinois
AANA MASTERS COURSE
Emerging Treatment and Controversies in Foot and Ankle Arthroscopy and Reconstruction
Course Director: Richard Ferkel, MD
www.aana.org

October 27-29, 2016 • Rosemont, Illinois
NEW HANDS-ON COURSE!
Watch for more details
Orthopaedic Learning Center
Course Chair: Steven Haddad, MD

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www.aofas.org/residentreview
• COMPLETE FOOT CARE COURSE (2014)
www.aofas.org/completefoot

AOFAS Members
To receive reduced member pricing, log in to www.aofas.org
at the top of the page before registering for courses, meetings and webinars, or purchasing an online subscription to recordings.

Current as of 3-23-16; subject to change
Physician Resource Center: Foot and ankle content at your fingertips

If you’ve visited the AOFAS Physician Resource Center (PRC), you know it provides educational content that includes peer-reviewed condition articles, abstracts, ePosters, meeting handouts and webinar, meeting and course recordings. But did you know the site houses nine years’ worth of information? Review the chart for a quick view of what you can find online using any device—PC, tablet or phone. New content comes online frequently, so check back often to see what’s been added.

Here is a chart of events:

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<tr>
<th>Year</th>
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<th>Video Content</th>
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<td>Specialty Day 2016 - Orlando, Florida</td>
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<td>Surgical Complications 2015 - Tampa, Florida</td>
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<td>Specialty Day 2008 - San Francisco, California</td>
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* Requires an additional subscription
Content available as of May 2016

For questions, email PRCinfo@aofas.org.
Fellowship news: Foot and ankle match results

The results of the 2016 AOFAS-sponsored Orthopaedic Foot & Ankle Fellowship Match for 2017-2018 positions were posted by the San Francisco Matching Program (SF Match) on April 5. The application process is administered by the AOFAS Executive Office and the matching process is handled by the SF Match. This was the 10th match sponsored by the AOFAS since reinstituting the program in 2006, and it was the eighth match administered by the SF Match.

At the Foot & Ankle Fellowship Directors Meeting on March 5 in Orlando, Florida, James Holmes, MD, Chair of the Fellowship Match Committee, presented statistics on this year’s applicant pool. Of the 75 applicants, 52 were U.S. medical graduates, three were Canadian medical grads and 20 were graduates of international medical schools. While the applications totaled 10 more than last year, the number of programs and available positions remained nearly the same at 46 and 74 respectively. See the accompanying chart for the comparison of available positions to applicants over the past five years.

Of the 46 programs participating in the match, 31 (67 percent) filled all of their positions, three (7 percent) partially filled and 12 (26 percent) did not match. Of the 74 positions offered, 56 (76 percent) were filled on match day. All of the U.S. and Canadian medical graduates as well as one international grad were matched. An additional four international grads found positions in the post-match scramble, bringing the total percentage of positions filled to 81 percent.

At press time, there were 14 positions among 13 programs still available. Interested candidates can find full information on these programs at www.aofas.org (Medical Community / Resident and Fellow Opportunities) and www.sfmatch.org and can contact the fellowship programs directly to apply.

### Historical Look at Fellowship Match Results 2012-2016

<table>
<thead>
<tr>
<th>Year</th>
<th>Programs Participating in Match</th>
<th>Positions Available in Match</th>
<th>Completed Applications</th>
<th>Total Positions Filled in Match + Scramble</th>
<th>Vacancies Post-Scramble</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012 Match for 2013-2014 Positions</td>
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<td>2013 Match for 2014-2015 Positions</td>
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<td>2016 Match for 2017-2018 Positions</td>
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**Note:** The chart shows the number of programs participating, positions available, completed applications, total positions filled, and vacancies post-scrabble for each match year from 2012 to 2016.
Three FAI CME Exams now available

The 2015 Foot & Ankle International (FAI) CME Exam debuted at Specialty Day in Orlando, Florida. With this third installment, AOFAS members and FAI subscribers can earn up to 30 hours of **AMA PRA Category 1 Credit™**, 10 credit hours per exam. For just $100 per exam, you can easily earn the 20 hours of MOC SAE credit required by the American Board of Orthopaedic Surgery (ABOS), all focused on foot and ankle topics.

Each exam has 100 multiple-choice questions testing general foot and ankle knowledge. The questions are inspired by, and have a link to, a specific reference article from **FAI**. Participants can take an exam in multiple sittings, using mobile devices or computers. Unlimited retakes are allowed, with a score of 70 percent or higher required to obtain credit. The CME certificate is available immediately upon achieving a passing score.

The **FAI** CME Committee prepares the exam questions from a volume year of the journal and each exam is reviewed and approved by the ABOS. “The FAI CME Exams are written by and for AOFAS members,” says Patrick Ebeling, MD, FAI CME Committee chair. “Each exam highlights the good work being published in our journal and provides a valuable service to our membership.”

**AOFAS Members:** Log in at [www.aofas.org](http://www.aofas.org) and go to **Members Only** (under Membership) for link to the exams and instructions for first-time log in.

**Non-Member Individual Subscribers:** Log in at [http://fai.sagepub.com](http://fai.sagepub.com) and click on the **CME** tab to start an exam or learn more.

**Accreditation**

The AOFAS is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) for physicians. The AOFAS designates each internet activity enduring material for a maximum of **10 AMA PRA Category 1 Credits™**. Physicians should only claim credit commensurate with the extent of their participation in the activity. Participants are required to submit a completed evaluation form at the end of each exam in order to receive CME credit.
It’s OUR FOUNDATION
Bryan Den Hartog, MD, President, Foundation Board of Directors

All of us in AOFAS recognize the Orthopaedic Foot & Ankle Foundation (The Foundation) as OUR FOUNDATION, but I would like to take this opportunity to trace the evolution of this important organization that supports key AOFAS programs and makes our specialty unique.

Started in 2001 by the AOFAS Board of Directors under the leadership of then-president Pierce Scranton Jr., MD, the Orthopaedic Foot & Ankle Outreach & Education Fund (OEF) was set up as an internal fund within the AOFAS.

The vision
Dr. Scranton’s vision for the OEF was to raise the membership to a new level of engagement and service. An important component of this new initiative meant raising funds to support expanded programming for education, research and humanitarian service. The vision was a catalyst for giving, and members, industry and friends of the Society were asked to make charitable contributions. With new monies, research grants increased and our humanitarian outreach project in Vietnam began.

In 2004, the OEF was incorporated as a separate 501(c)(3) charitable organization. It continued to support research and humanitarian service, and in 2005 the Traveling Fellowship Program was added.

Fast forward to 2010, when educational outreach began in earnest with the launch of the Resident Scholarship Program, Visiting Professor Program and Resident Review Course. Benefits for fellows in training were added soon after, and all of these programs have become integral to the fabric of the AOFAS and have generated interest and growth in our Society.

Foundation Mission
The Orthopaedic Foot & Ankle Foundation is a separate repository for financial resources whose purpose is to promote and execute the mission of the AOFAS in advancing education, research and humanitarian endeavors.

With an expanded view on outcomes research, our own Orthopaedic Foot & Ankle Outcomes Research (OFAR) network began and, with funding from the OEF, it is taking AOFAS to the next level in research.

New name, expanded vision
That brings us to 2014 and the OEF Board’s decision to expand the vision with a new name – the Orthopaedic Foot & Ankle Foundation (The Foundation), a modern new logo and a forward-thinking fundraising campaign. Our goal for Campaign 50? To raise $3 million by the 2019 celebration of the 50th anniversary of the AOFAS. It is a big, hairy, ambitious goal to be sure, but one that is important to the future of our specialty. It will enable us to continue to expand the vision and more fully engage, serve and equip our membership to provide the highest quality care for our patients.

Please join with colleagues in making a pledge and giving generously to The Foundation’s Campaign 50. Pay it forward and help us reach the goal! This is OUR FOUNDATION, our specialty and our future.

Thank you.

Foundation Mission
The Orthopaedic Foot & Ankle Foundation is a separate repository for financial resources whose purpose is to promote and execute the mission of the AOFAS in advancing education, research and humanitarian endeavors.

Donating with long-term appreciated securities
You can significantly increase the amount of funds available for charitable giving by taking advantage of the applicable tax incentives. This is one of the most tax-efficient ways to give.

The two key advantages:
Any long-term appreciated securities with unrealized gains (meaning they were purchased over a year ago, and have a current value greater than their original cost) may be donated to a public charity and a tax deduction taken for the full fair market value of the securities, up to 30 percent of the donor’s adjusted gross income.

Since the securities are donated rather than sold, capital gains taxes from selling the securities do not apply. The more appreciation the securities have, the greater the tax savings will be.

To donate appreciated securities to The Foundation, provide the following information to your investment advisor/manager:
Schwab’s DTC #: 0164
Schwab account #: 4416-4523
Schwab account title: Orthopaedic Foot and Ankle Foundation

Please notify AOFAS Finance Manager Dianne Gilsenan at 847-430-5078 or dgilsenan@aofas.org so staff can track your transfer.

The Foundation is a pivotal force for growth, development and vitality in our specialty.
— Mark Easley, MD, AOFAS President

Foundation Mission
The Orthopaedic Foot & Ankle Foundation is a separate repository for financial resources whose purpose is to promote and execute the mission of the AOFAS in advancing education, research and humanitarian endeavors.
Giving Matters
Ways to give can be simple and significant

**Make a five-year pledge**
Send an email to AOFAS Finance Manager Dianne Gilsenan at dgilsenan@aofas.org stating the total amount of your pledge to The Foundation and the frequency of your donations.

**Donate online**
Add on a donation to The Foundation at www.aofas.org when paying your AOFAS dues or registering for a meeting.

**Make a recurring gift**
Choose the ease of creating a recurring gift. This can be easily set up according to the amount, frequency and duration you designate, either by:
- Authorizing The Foundation to charge your credit card in installments designated by you, or
- Sending a voided check to The Foundation with instructions for deductions designated by you.
Please contact Dianne Gilsenan, Finance Manager, 847-430-5078, dgilsenan@aofas.org to set up a recurring gift.

**Honor your mentor or a loved one**
Donate online and enter the name of the person in whose honor or memory you are making your gift. A tribute gift is a meaningful way to show your appreciation and respect.

**Donate appreciated securities**
Make your charitable dollars go farther. Rather than selling appreciated securities (stocks, bonds and/or mutual funds) and then donating the cash proceeds, donating directly to The Foundation is one of the best and easiest ways to give more. See accompanying article on page 14.

**Leave a legacy with a planned gift**
A planned gift to The Foundation ensures that your generosity will continue to advance the mission of the AOFAS in education, research and service.

When you write or review your will, please consider a charitable bequest to the Orthopaedic Foot & Ankle Foundation as an investment in the future of the specialty. You may bequest a specific amount of money or a percentage of your estate. Another relatively simple option is to designate The Foundation as the beneficiary of a life insurance policy or the assets of a retirement plan.

If you have already made a charitable bequest, please let us know. We would like the opportunity to express our gratitude.

**Charitable IRA rollovers**
If you are 70½ or older, you can take advantage of the Individual Retirement Account (IRA) Rollover – a simple, tax-wise way to support The Foundation.

You can transfer up to $100,000 from your IRA directly to The Foundation and not pay income tax on the money.

The IRA Charitable Rollover no longer has an expiration date, so you are now able to make annual gifts to The Foundation at any time.

**What are the advantages?**
- Your gift will be put to good use in supporting vital programs.
- Your IRA gift can satisfy all or part of your required minimum distribution for the year if it is transferred directly from your IRA to The Foundation.
- The transfer generates neither taxable income nor is a tax deduction, so you benefit even if you do not itemize your tax deductions.

**Questions?**
Please contact Zan Lofgren, CAE, Development Officer, 847-430-5074, zlofgren@aofas.org, or Dianne Gilsenan, Finance Manager, 847-430-5078, dgilsenan@aofas.org.

AOFAS Staff are all in • 100% of AOFAS staff members have donated to The Foundation. • Have you?
The AOFAS Awards & Scholarships Committee has selected five young members (age 45 or younger) to participate in the 12th annual Traveling Fellowship Program. The program is designed to bring together early career foot and ankle surgeons and those established in the field to promote professional and international relationships, exchange ideas and encourage new thinking on research and clinical care topics. The 2016 Traveling Fellows were announced at AOFAS Specialty Day on March 5 in Orlando, Florida.

Congratulations to:
- Young-uk Park, MD, PhD – South Korea
- Sudheer Reddy, MD – United States
- Chamnanni Rungprai, MD – Thailand
- Martin Wiewiorski, MD – Switzerland
- Yuan Zhu, MD – China

The following members will host the fellows at their institutions before or after AOFAS Annual Meeting 2016 in July: Timothy Daniels, MD, at St. Michael’s Hospital in Toronto, Ontario, Canada; Johnny Lau, MD, at University of Toronto, also in Toronto; Christopher Chiodo, MD, and Jeremy Smith, MD, at Brigham Foot & Ankle Center in Boston, Massachusetts; Donald Bohay, MD, at Orthopaedic Associates of Michigan in Grand Rapids, Michigan; and James Nunley, II, MD, and Mark Easley, MD, at Duke University Medical Center in Durham, North Carolina.

The Traveling Fellowship Program is funded by the Orthopaedic Foot & Ankle Foundation (The Foundation) with a grant from DJO Global.

News from the OFAR Managerial Board

The AOFAS Orthopaedic Foot & Ankle Outcomes Research (OFAR) Managerial Board, chaired by Kenneth Hunt, MD, is completing plans to begin developing its registry infrastructure. The Managerial Board is enthusiastic about aligning with a vendor whose capabilities can support a broad range of short- and long-term OFAR goals. The registry will collect high-quality data to fulfill AOFAS member needs, including physician, site, hospital and institution quality assurance; outcomes research and prospective clinical research studies; Centers for Medicare & Medicaid Services reporting requirements; and device approval studies and related regulatory support from the U.S. Food and Drug Administration.

Member enrollment by YE
OFAR aims to begin enrolling AOFAS member sites in a pilot ankle arthritis study and collecting data on foot and ankle patient reported outcomes by the end of 2016, followed by a scaling-up of the number of participating sites and included procedures and conditions. Watch for more information at AOFAS Annual Meeting 2016 in Toronto, Ontario, Canada. You can also contact Joy Keller, AOFAS Director of Research, by emailing research@aofas.org or by calling 800-235-4855 or 847-698-4654 (outside U.S.).

Foundation support vital
The OFAR Managerial Board is grateful for generous donations to the Orthopaedic Foot & Ankle Foundation (The Foundation) that are essential to ongoing OFAR development, startup and early implementation phases. The long-term goal is a mature registry operating on a sustainable business model and providing high-quality data useful for many purposes.

“Member and industry support for OFAR through The Foundation is an investment in the Society’s future and will play a key role in fulfilling our mission to improve patient care through the highest quality research,” says Dr. Hunt.
AOFAS announces record number of Resident Scholars

The AOFAS Awards & Scholarships Committee has awarded 50 scholarships to orthopaedic residents in training across the United States and Canada in the most competitive year yet for the Resident Scholarship Program. The program offers orthopaedic residents with an interest in foot and ankle the opportunity to attend this year’s AOFAS Annual Meeting in Toronto, Ontario, Canada, as a guest of the Society. The scholarship covers registration fees for the Pre-meeting Sports Course, AOFAS Annual Meeting 2016 and Young Orthopaedic Surgeons Forum, as well as lodging for four nights and a transportation stipend. Scholars will be paired with AOFAS members interested in serving as mentors during the Annual Meeting.

The Awards & Scholarships Committee is pleased to announce the 2016 Resident Scholars:

Mostafa Abousayed, MBCh
Albany Medical Center
Christopher Adair, MD
Carolinas Medical Center
Craig Chike Akoh, MD
University of Iowa
Shannon Alejandro, MD
Geisinger Medical Center
Dillon Arango, MD
Einstein Medical Center
Lara Atwater, MD
Johns Hopkins Hospital
Malick Bachabi, MD
Johns Hopkins Hospital
Patrick Barousse, MD
University of South Alabama
Taylor Beahrs, MD
Mayo Clinic
David Beck, MD
Thomas Jefferson University Hospital
Christopher Belveya, MD, MBA
Tripler Army Medical Center
Kevin Campbell, MD
Rush University Medical Center
Jeremy Chan, MD
Stanford University
Megan Clair Chapter, DO
Rowan University School of Osteopathic Medicine
Grant Cochran, MD
Naval Medical Center San Diego
Catherine Conlin, MD
University of Toronto
Sally Corey, DO
Dwight D. Eisenhower Army Medical Center
Matthew Crawford, MD
Duke University Medical Center

James Davies, MD
University of South Carolina
Robert G. Dekker, MD
Northwestern University
Fred Finney, MD
University of Michigan
Jason A. Fogleman, MD
University of Tennessee at Chattanooga
Mitchell Fourman, MD
University of Pittsburgh Medical Center
Rabun Fox, MD
Louisiana State University
David A. Goss Jr., DO
OhioHealth Doctor’s Hospital
Roman Guerrero-Maestre, MD
University of Puerto Rico
Ajay Gurbani, MD
University of California Los Angeles
David Hankins, MD
University of Florida
Sarah Heintzman, MD
University of Wisconsin
Karl Henrikson, MD
University of Pittsburgh Medical Center
Adam Huff, MD
Indiana University School of Medicine
Sean Lannon, MD
University of South Florida
Brian Lau, MD
University of California San Francisco
Robert Lewis, MD
University of Texas Southwestern Medical Center
Evan Loewy, MD
University of South Florida
Andrew P. Matson, MD
Duke University Medical Center
Roshan Melvani, MD
Medstar Union Memorial Hospital
Stuart Michnick, MD
University of Washington
Brandon Morris, MD
Kansas University Medical Center
Devon Nixon, MD
Washington University
Matthew Pigott, MD
University of Michigan
Jessica Reissig, DO
Hofstra Northwell Health School of Medicine
Damien Richardson, MD
University of Arizona Phoenix
Kenneth Smith Jr., MD
University of Alabama Birmingham
Nyall Smyth, MD
University of Miami, Jackson Memorial Hospital
Lauren Szolomayer, MD
Yale University School of Medicine
Rufus Van Dyke, MD
Miami Valley Hospital
Martin Weisman, MD
Beaumont Health, Wayne State University
Megan Wolf, MD
University of Connecticut
Chia Wu, MD
University of Pennsylvania

This year’s Resident Scholarship Program is funded by the Orthopaedic Foot & Ankle Foundation (The Foundation) with grants from Stryker Foot & Ankle and Wright Medical Technology, Inc.
Seven research projects receive AOFAS grants

The AOFAS Research Committee is pleased to announce seven recipients in the AOFAS Research Grants 2016 cycle. Chair L. Daniel Latt, MD, PhD, announced the projects at Specialty Day, March 5, 2016. Of 23 applications received, the funded projects for 2016 included:

- Two Pilot Project Grants (up to $5,000), a category added for the 2015 cycle
- Three Small Project Grants (up to $20,000)
- Two Established Project Grants (up to $50,000), a new category for the 2016 cycle

With the 2016 awards, the Research Grants Program has awarded 91 grants of more than $1 million since 1997. Grants awarded by the AOFAS have had an impact on innovations in foot and ankle care and resulted in presentations at AOFAS and other educational meetings, published articles in *Foot & Ankle International* (FAI) and other specialty journals, and data to support larger grants from national funding sources.

New in 2016 is the Established Project grant category, which will be piloted for two cycles. This competitive grant category is intended to support innovative research for basic science, clinical trial or pre-trial work that can be a stepping stone to additional grants from national funding sources. Established Project grant applications must be backed by preliminary work, data and/or publications or abstracts to demonstrate feasibility of projects and capabilities of the research team. See [www.aofas.org/researchgrants](http://www.aofas.org/researchgrants) for more details.

Congratulations to the 2016 funded investigators!

**Pilot Project Grants**
Christopher W. Reb, DO; Gregory C. Berlet, MD

*“Do Knee Scooters Contribute to Lower Extremity Venous Stasis?”*

Bryan Smith, MD; Michael S. Pinzur, MD; Robert M. Havey, MS; Muturi G. Muriuki, PhD; Adam P. Schiff, MD

*“Development of a Real Time Model of Foot and Ankle Kinematics During Simulated Gait—A Pilot Study”*

**Small Project Grants**
Frank DiLiberto, PT, PhD; Steven L. Haddad, MD; Anand M. Vora, MD

*“A Prospective Analysis of Midfoot Function, Ankle Power and Patient Functional Outcomes After Total Ankle Arthroplasty”*

Jason T. Bariteau, MD; Rishin J. Kadakia, MD; Mara L. Schenker, MD; Nick J. Willet, PhD

*“Evaluation of Local Vancomycin Powder on Osteoblastic Function and Healing in a Rodent Ankle Arthrodesis Model”*

Christopher W. DiGiovanni, MD; Bart Lubberts, MD; Bryan G. Vopat, MD

*“Arthroscopic Evaluation of the Ankle Syndesmosis: A Cadaveric Study”*

**Established Project Grants**
Nicola Krähenbühl, MD; Lukas Zwicky, MSc; Liliana Bolliger, MSc; Markus Knupp, MD

*“Supramalleolar Osteotomy: Mid- to Long-Term Results of 298 Consecutive Patients”*

Mark R. Buckley, PhD; Adolph S. Flemister Jr., MD; Alayna E. Loiselle, PhD; Michael S. Richards, PhD

*“In Vitro Assessment of the Role of Mechanical Strain in the Pathogenesis and Reversal of Insertional Achilles Tendinopathy”*

This year’s Research Grants Program is funded in part by donations to the Orthopaedic Foot & Ankle Foundation (The Foundation), including a donation from Wright Medical Technology, Inc.

Visiting Professor Program calls for applications

The AOFAS Visiting Professor Program is accepting applications. Designed to enhance the educational experience of orthopaedic residents, the program sends a Visiting Professor to participate in clinics, lectures and/or grand rounds.

Residency programs without full-time orthopaedic foot and ankle faculty are encouraged to apply to host a Visiting Professor. Senior members of the AOFAS, including Board members, serve as Visiting Professors, and AOFAS staff members work with host institutions on dates and availability. The AOFAS Post Graduate Education & Training Committee reviews all applications, and approved programs are expected to organize a day of learning and an evening dinner or journal club to continue informal learning and networking.

An application may be found online at [www.aofas.org](http://www.aofas.org) (Medical Community / Resident and Fellow Opportunities). The Visiting Professor Program is funded by donations from individuals and industry to the Orthopaedic Foot & Ankle Foundation (The Foundation).
Thank you to Corporate Donors

The AOFAS and The Foundation acknowledge these companies for their generous support of the AOFAS mission through donations to The Foundation.

<table>
<thead>
<tr>
<th>2016 CORPORATE DONORS</th>
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<tr>
<td>PLATINUM - $250,000 to $499,999</td>
<td>WRIGHT FOCUSED EXCELLENCE</td>
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<td>GOLD - $100,000 to $249,999</td>
<td>Arthrex®</td>
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<td>COPPER - $5,000 to $24,999</td>
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With research funding top-of-mind, orthopaedic surgeons, patients and researchers once again descended on Washington, D.C., for AAOS Research Capitol Hill Days in April. The annual event promotes federal funding for musculoskeletal research and gives patients and surgeons an opportunity to meet with U.S. senators and representatives. Advocacy teams urged members of Congress to appropriate $34.5 billion in fiscal year 2017 to the National Institutes of Health (NIH) and to support the Next Generation Researchers Act.

AOFAS Member Timothy Charlton, MD, participated on behalf of the Society with one of his patients, Brett Botelho, who has a degenerative nerve condition that required a reconstructive amputation. AOFAS Past President Steven Haddad, MD, attended on behalf of the AAOS accompanied by patient Pam Schroeder, who had a total ankle replacement. Other patients of all ages, backgrounds and conditions told their stories to select legislators, all with the goal of helping them understand the impact that funding has on musculoskeletal care.

President Obama’s 2017 NIH budget requests $33.126 billion in funding, a small increase over current funding levels. The orthopaedic community urged Congress to appropriate at least $34.5 billion through the Labor-HHS-Education Spending Bill for fiscal 2017. This number represents five percent real growth above the projected rate of biomedical inflation, and will help ensure that NIH-funded research can continue to improve the nation’s health.

“Encouraging legislators to increase funding for orthopaedic research was time well spent,” says Dr. Haddad. “The future of our discipline is directly linked to scientific advances, both groundbreaking and ground-sustaining. We also encouraged legislation to promote the funding of young investigators, as the percentage of grants awarded to those under 36 years old has decreased over the past four decades from 18 percent to 3 percent of total provided funding. This subset of creative minds needs to pursue cutting-edge academic ideas.”
As you know, the AOFAS recently was at risk of losing its organizational representation in the American Medical Association (AMA). We needed at least 20 percent of AOFAS Active Members to join or renew their AMA membership to meet the required threshold for the Society’s participation in key AMA health policy areas.

At press time, we believe we have exceeded our 20 percent target. AOFAS members stepped up and joined, so our AMA delegate seat is safe for another five years. This organizational representation includes not only our seat in the House of Delegates, but also our representation in the Young Physicians Section and on the CPT Advisory Committee and the RUC (Relative Value Update Committee) Advisory Committee. It also gives AOFAS participation in the AMA Scope of Practice Partnership, which complements and goes beyond the American Academy of Orthopaedic Surgeons (AAOS) and the Orthopaedic PAC in assisting national and state organization on legislative and regulatory scope issues, including podiatry.

The AMA and the AAOS are two of the strongest advocacy voices in Washington, D.C. They counter the well-funded voices of groups such as trial lawyers and insurance companies, whose interests often do not coincide with ours. Our membership and financial support of their advocacy efforts are important since the greater the percentage of orthopaedic surgeons who belong to these two organizations, the more credibility they have with legislative and regulatory decision-makers.

Some AOFAS members have questioned why they and our Society should support the AMA given its perceived role in the adoption of the Affordable Care Act (ACA). The best answer is that we as individual physicians and as the AOFAS should support and belong to the AMA because doing so is in the best interest of our practices and patients.

With respect to the ACA, it’s true that the previous AMA leadership could have done some things differently, but the organization was under enormous political pressure, and with most compromises, some undesirable provisions are accepted to gain some good ones. The current AMA leadership is committed to modifying and improving the ACA. Current AMA policy is to keep the good parts, such as eliminating the pre-existing condition restriction and allowing children to stay on their parents’ insurance plans until age 26, while modifying the bad parts, such as eliminating the poorly conceived Independent Payment Advisory Board.

Current AMA policy advocates for many things that are beneficial for private-practice, academic-based and hospital-employed physicians, medical students, residents, fellows and public health professionals. We all gain when our voices are heard in Washington.

Thank you for supporting the AOFAS and its position in the medical community by joining the AMA.

FOOT AND ANKLE SURGEON NEAR ST. LOUIS, MISSOURI

Mercy Clinic is seeking a Foot and Ankle Surgeon to join a busy practice and expand our services on campus of Mercy Hospital in Washington, Missouri.

This position offers a strong referral base from our primary care physicians; on-site Surgery Center, MRI, and in-office x-ray; new state-of-the-art equipment; strong mid-level provider support in Clinic and OR; and system-wide Epic EMR.

Employment with Mercy Clinic includes:
- Highly competitive compensation.
- Comprehensive benefits including health, dental, vision and CME.
- Relocation assistance and professional liability coverage.

Mercy Clinic is located in Washington, MO; a budding community only a short drive from St. Louis with the perfect combination of the amenities of a big city and the charm of a small town.

Please contact:
Megan Sievers, MHA | Associate Recruiter
314-364-3840 | Fax: 314-364-2597
Megan.Sievers@Mercy.net | www.Mercy.net
If you like acronyms you’re going to love this. But if you are a Seinfeld fan, you may not find the MIPS as entertaining as MOOPS in the Bubble Boy episode.

In 2015, the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) was signed into law. MACRA repealed the Sustainable Growth Rate (SGR) which had prevented annual increases in Medicare reimbursements for physician fees. In its place, the bill implemented a new payment model, known as Merit-Based Incentive Payment Systems (MIPS) and established bonus payment for participation in Alternative Payment Models (APMs). MACRA also created future penalties for those who do not participate in value-based programs through Medicare.

MACRA is intended to reward quality and value through the use of MIPS and APMs. MIPS combines the Physician Quality Reporting System (PQRS), Electronic Health Record (EHR) incentive and Value-based Payment Modifier (VBM). A single MIPS composite performance score will result and effect payment in the future starting 2019. Currently and through 2018, a physician or group’s PQRS, EHR use and VBM will affect payments until these new programs take effect.

The APMs offer the greatest potential reward, and Centers for Medicare and Medicaid Services (CMS) has goals to increase this to 50 percent of payments by 2018. These include Medicare Shared Savings Programs (commonly known as Accountable Care Organizations or ACOs), Demonstration Programs and CMS innovation Center models. The APMs include Accountable Cost Organizations and bundled payments, which mostly apply to surgeons. Participation in APMs will be rewarded by 5 percent lump-sum bonus payments from 2019-2024, and potentially higher reimbursement after 2025. If you participate in one of these alternative payment models, you may obtain an exception from MIPS or favorable scoring under the MIPS program.

Starting in 2019, your MIPS score will effect an increase or decrease in payment. The planned scale is as follows: 4 percent in 2019, 5 percent in 2020, 7 percent in 2021 and 9 percent thereafter. The bad news is that these programs are revenue neutral. This means that all providers will be operating on a curve. The highest 50 percent of providers based on the MIPS score will receive bonuses from Medicare. However, the lowest 50 percent will have penalties imposed on Medicare payments. It would be in your best interest to be on the positive side of this Bell curve. There are a few exceptions to MIPS: first year of Medicare participation, eligible APM participation, and if you are below the low volume threshold (which has yet to be determined).

**The good news is you have time to prepare. The bad news is it's not a lot of time, as these programs start Jan. 1, 2017.**

The VBM assesses quality of care and cost of care during a performance period. This is based on a new methodology with continual revisions based on your claims history data. This means the score will be based in part on how much of Medicare’s money you are spending. Quality will be assessed by PQRS reports (including CAHPS patient surveys), hospital admissions and readmissions. Cost of care will be determined by total per capita cost per Medicare beneficiary and Medicare spending per beneficiary (MSPB). The VBM is a numerical factor that is determined during the performance period calendar year by eligible professionals (EPs). Many of these factors are applied in the following fashion: 2015 for groups with >100 EPS, 2016 for groups with >10 EPS, and all EPs in 2017 as the Affordable Care Act (ACA) requires CMS. Currently, the data to determine this VBM factor were obtained in 2013, 2014 and 2015, respectively.

The AOFAS CPT/RUC Committee cannot possibly prepare you and your group for all these changes. However, our goal is to inform you and provide some education basics in regard to these highly complex programs. The essential message is that over the next five years, CMS intends to change to a more value-based incentive model. One route is through ACOs and bundled payments. The other route is MIPS where PQRS, EHR use, high quality and cost containment will be paramount. It is highly recommended you learn more about these programs as soon as possible so that you are prepared for the upcoming changes in reimbursement in the Medicare programs. You can learn more about these programs through the CMS website, www.cms.gov as well as the AAOS, www.aaos.org.

**A guide to acronyms**

Making sense of Medicare payment models means understanding all the various acronyms involved:

- **ACOs**  Accountable Care Organizations
- **APMs**  Alternative Payment Models
- **EHR**  Electronic Health Record
- **MACRA**  Medicare Access and CHIP Reauthorization Act of 2015
- **MIPS**  Merit-Based Incentive Payment Systems
- **MSPB**  Medicare Spending per Beneficiary
- **PQRS**  Physician Quality Reporting System
- **SGR**  Sustainable Growth Rate
- **VBM**  Value-based Payment Modifier
MEMBERSHIP MATTERS

Congratulations to new and elevating members

With AOFAS membership at 2,200, the Society continues to thrive. Your support and participation are essential, and your contributions are appreciated. AOFAS extends a special welcome to all NEW Members as of March 5, 2016.

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Congratulations to all AOFAS Members who have advanced their membership as of March 5, 2016.

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New way to claim Specialty Day CME
Announcing a change! CME credit for AOFAS Specialty Day 2016 must be claimed through AOFAS. It may be claimed through the AOFAS mobile app or through the CME claim form available at www.aofas.org/education. Login is required to view and print CME certificates.

The AOFAS is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. The AOFAS designates the Specialty Day meeting for a maximum of 9 AMAPRA Category 1 CME™ credits. Physicians should only claim credit commensurate with the extent of their participation in the meeting.

Robert Mumby, MD, Emeritus Member, died June 27, 2015, in Orlando, Florida. He was 85.

Dr. Mumby graduated from the University of the South, Sewanee, Tennessee, and earned his medical degree from the University of Miami School of Medicine, Miami, Florida. He served in the U.S. Air Force from 1954 to 1991, both on active duty and in the reserves, and was named Flight Surgeon of the Year in 1965. He served in Desert Shield / Desert Storm before retiring as a colonel in 1991.

Dr. Mumby began his orthopaedic career in Orlando in 1966 and founded the Orlando Orthopaedic Center in 1972 with his late partner, J. Darrell Shea, MD. Dr. Mumby was also instrumental in establishing the Spinal Injury Unit at Lucerne Hospital, also in Orlando.

He is survived by his wife, Ruth; son Alex; father Seymour; and sisters Eileen Lichtenfeld and Roberta Goldman.

Questions about your membership status and related benefits should be directed to Membership (Krista Stewart or Chris Johnson) at membership@aofas.org or 800-235-4855 or 847-698-4654 (outside U.S.).