Dear Colleagues,

As I assume the role of AOFAS President, I am both honored and humbled by the opportunity before me. But it occurs to me that this occasion isn’t really about me. It’s about all of you. It’s about us. It’s about 50 years of being leaders, pioneers, and innovators. It’s about standing taller than our competitors, despite our modest numbers, because of the quality and the commitment of our membership — the Decisiveness, the Dynamic attitude, and the Dedication — as our brand espouses. It’s about the climate of medicine, the challenges we face, the obstacles we need to overcome. It’s about what we can do together.

It is my belief that being a leader is also being a servant. It’s about service and stewardship to the Society that has provided so much, evolved so spectacularly, and created opportunity for all involved. My role is simple. It is to further the efforts and initiatives of my predecessors to make this Society a true shining star among orthopaedic specialty societies.

CONTINUED ON PAGE 4

AOFAS marks 50 years with a record-setting meeting

This year’s AOFAS Annual Meeting doubled as an anniversary celebration as our Society reached a milestone 50 years old. More than 2,300 medical professionals, guests, and exhibitors spent four days in Chicago learning about the history of foot and ankle surgery and discussing and debating ideas to help drive the specialty into the next 50 years.

The week kicked off on Thursday, September 12, with an “old versus new” Pre-meeting Course chaired by Michael J. Coughlin, MD, Patrick B. Ebeling, MD, and Christopher B. Hirose, MD. This daylong historical recap provided attendees with a look at “the way it was” 50 years ago in foot and ankle surgery, and the significant change in practice and procedures over the years.

CONTINUED ON PAGE 6
AOFAS install new Board

Congratulations to the 2019-20 AOFAS Board of Directors, installed at the Society’s annual Business Meeting on September 14, 2019, in Chicago, Illinois.

AOFAS is now on Instagram! Follow us @AOFAS1.

New benefits for AOFAS members

AOFAS Connect
Join the conversation on the new online forum exclusively for AOFAS members. Get advice on tough cases, find resources, network with colleagues, and more. Visit connect.aofas.org to start exploring.

AOFAS CME OnDemand
Access foot and ankle education and earn CME credit anytime, anywhere! With this new feature on the Physician Resource Center, you can complete online courses on your schedule. AOFAS members receive discounted rates. Get started at aofas.org/PRC.
It is hard to believe AOFAS Annual Meeting 2019 has come and gone! After the dust settled, I had time to reflect not only on the meeting, but also the history of the AOFAS. It was a wonderful celebration of the first 50 years of the Society.

It started with the Pre-meeting Course where Dr. Michael Coughlin and his co-chairs Drs. Patrick Ebeling and Christopher Hirose created an exceptional program looking at traditional versus current treatment options for foot and ankle conditions. It was fun to see so many very accomplished speakers from different generations present their views. This was followed by the Scientific Session where Dr. Steven Haddad created a very educational and interactive program. The combination of outstanding education and the 50th Anniversary led to the AOFAS meeting with the highest attendance of all time.

This brings me to the heart of the matter. None of the Society’s achievements would be possible without the time and efforts from so many of you. I want to thank all the committees and committee members for all the work you did and still do (see page 28). This is the engine of our Society. It is only when every part works individually but also in concert with the others that we move forward.

I have to mention Elaine Leighton and the remarkable staff of the AOFAS. Over 50 years the Society has grown into a larger, more complex organization and without exceptional leadership and management it can derail very quickly. Elaine and her staff are running a tight ship and we are in great shape to enter the next era of the AOFAS.

Lastly, I would like to thank the Board of Directors. We all probably spent a little more time together than we would have liked, but it has been an honor to serve on the board with a group of people so committed to the well-being of the Society without any personal agendas. It was a special year.

Now it is onwards under the leadership of Dr. William McGarvey. He has an amazing skill set in leadership and I know we will be a stronger society a year from now.

Thank you very much for allowing me to serve over the past six years. It has been an enriching experience.

With gratitude,

J. Chris Coetzee, MD
We’ve come a long way from the small group of surgeons that met in Chicago in 1969.

We’ve seen changes in our location, in our branding, in our management and leadership structure.

We’ve gone through total restructuring of governance. Made it fair and equitable based on gender, race, and ethnicity. We’ve provided transparency to the committee process to broaden the scope, input, and involvement from membership.

We continue to focus on increasing opportunities for women and underrepresented groups and on reaching out to our international brethren in the foot and ankle world.

Going forward, I see opportunities to establish ourselves as the leaders in foot and ankle while working strategically with our podiatric colleagues in ACFAS and APMA to improve the quality of care and care delivery systems.

I see unlimited potential in our ability to lead foot and ankle education. The Physician Resource Center (PRC) offers opportunities to not only provide traditional educational methods and materials, but also to generate novel, innovative forms of learning and eventually recertification training.

We have increased our international outreach, demonstrated by our group’s presence in educational forums in China, Oman, Egypt, and Paris, as well as our collaboration with our colleagues in EFAS and IFFAS.

Research continues to be a priority for us as we spearhead advances in foot and ankle techniques, devices, and methodology. While the Orthopaedic Foot & Ankle Outcomes Research Network (OFAR) did not evolve as we envisioned, we still recognize the need for big data collection and analysis of patient outcomes. The effort put us in position to partner with larger, more facile groups, and also helped identify a generation of young talent that should keep us going well into the future with vibrant ideas, untapped skill sets, and limitless energy.

Under the watchful guidance of Dr. Bryan Den Hartog and now Dr. Scott Ellis, the Orthopaedic Foot & Ankle Foundation has become a formidable enterprise. Your contributions to Campaign 50, the Pillars honoring Drs. William Hamilton, John Gould, and Sigvard Hansen, and the new Roger and Joan Mann Family Education Fund have created and promoted financial stability and opportunity not previously seen or considered possible.

Drs. Tom Lee, Bruce Cohen, Bryan Den Hartog, and Scott Ellis, with AOFAS Executive Director Elaine Leighton and her seemingly tireless staff, have taken what was once a “mom and pop” approach to book balancing and developed a fiscally sound enterprise, managing funding and investing successfully and carefully to ensure stability and growth.

Foot & Ankle International, under the incredible supervision of Dr. Dave Thordarson is the number-one-ranked journal in foot and ankle. And Dr. Dan Latt did a remarkable job helming the initiation of Foot & Ankle Orthopaedics, our online open-access journal, helping us move forward into a more contemporary forum of information delivery. We now look to fuse the editor-in-chief positions moving forward so the two entities can grow in parallel.

What is my role in all of this? To listen to you and keep the momentum going into the next half century.

This is your AOFAS. As such, I would like to offer leadership by service, interaction, and teamwork. Build on the things that have been successful. Learn from and potentially modify things that weren’t. Add interest and innovation to our brand as a world leader in the foot and ankle arena.

These are my charges. To serve you and make this our AOFAS. One that you can continue to be proud of and continue to be part of.

The maturation of the Society from a small office into a fully functional, appropriately staffed, fiscally sound, financially responsible operation within the AAOS complex has been with the sincerest of motives: To create a support system organization that strives to be the premier provider of all things foot and ankle. To meet and exceed the expectations of its constituents, our members. To promote research to better serve our patients and more efficiently and effectively provide care. To be at and stay at the forefront of technological development. To provide stable leadership in an unstable climate. To promote and cultivate the leaders and vibrant minds of the next generation in order to maintain our position as what I believe to be, simply, the best professional organization within the so-called “House of Orthopaedics.”

Our assets are coveted by many other professional societies. Aside from somewhat trite descriptors like cohesiveness and commitment, the allure of the AOFAS, as I see it, is its inherent fraternalism. The aura of fun. There is a culture that exists here.

These are my charges. To serve you and make this our AOFAS. One that you can continue to be proud of and continue to be part of.
that is far more natural and organic than that of many other groups. It is that underlying level of comfort and acceptance that generates the appeal of the AOFAS.

For those reasons and so many more, the AOFAS is a great place to be now and should be so for years to come. Please, stay involved if you are, get involved if you’re not, and re-engage if you were involved but aren’t anymore.

While I said this isn’t about me, I would like to thank the people who have been so supportive over the years. To my mentors, Mark Myerson, Lew Schon, Don Baxter, and Tom Clanton, contemporaries Steve Haddad, Bob Anderson, Chris Coetzee, Tom Lee, and so many more, you opened doors for me to have this chance and I could not have done it alone. To my parents for their unwavering support. But above all, to my beautiful wife, Kellie, and my three lovely daughters, Madison, Sophia, and Mia, who have willingly sacrificed their time and self-interests to support me in all that I do. I am truly blessed and have no way to repay what they have given me.

In closing, I’d like to make this offer: If you really want to know something more about me, or alternatively, want me to know something about you, talk to me. Ask anything you want. More importantly, tell me how I can help you achieve your goals. Tell me what we’re doing right. Tell me how we can be better. Help me make it a good year. Help me make it about you!

Respectfully,
William C. McGarvey, MD
A venerable “who’s who” of foot and ankle orthopaedic surgeons helped shape the day, as more than 20 AOFAS past presidents moderated and presented sessions throughout the day.

While the Pre-meeting Course was taking place, AOFAS also hosted an all-day Allied Health Practitioner Program. The program was presented by the Allied Health Workgroup, chaired by Thomas M. Hearty, MD, DPT. Allied professionals including physical therapists, nurse practitioners, and physician assistants spent the day discussing nonoperative and operative management and imaging for returning to sports, trauma, degeneration, and forefoot. A hands-on Foot and Ankle Exam breakout session allowed participants to hone their patient care and learn from each other in small groups. CarolLynn Meyers, PT, delivered a keynote on compression wrapping and postoperative care after foot and ankle reconstruction.

Concurrently, the AOFAS Young Physicians Committee and the AOFAS Postgraduate Education and Training Committee presented a daylong Resident Program that included presentations on introductory concepts in foot and ankle surgery and roundtable case discussions. In addition, a Fellowship Fair over lunch gave residents the opportunity to meet with representatives from orthopaedic foot and ankle fellowship programs and learn more about available fellowships.

Thank you to the AOFAS past presidents who served as moderators and presenters at the Pre-meeting Course:

- Thomas H. Lee, MD (2017-2018)
- Jeffrey E. Johnson, MD (2016-2017)
- Mark E. Easley, MD (2015-2016)
- Bruce J. Sangeorzan, MD (2014-2015)
- Steven L. Haddad, MD (2013-2014)
- Lew C. Schon, MD (2012-2013)
- Judith F. Baumhauer, MD, MPH (2011-2012)
- Keith L. Wapner, MD (2010-2011)
- Charles L. Saltzman, MD (2009-2010)
- Robert B. Anderson, MD (2008-2009)
- Steven D.K. Ross, MD (2007-2008)
- James W. Brodsky, MD (2005-2006)
- Mark S. Myerson, MD (2004-2005)
- Glenn B. Pfeffer, MD (2003-2004)
- Thomas O. Clanton, MD (1999-2000)
- Ronald W. Smith, MD (1998-1999)
- G. James Sammarco, MD (1996-1997)
- Robert B. Adelaar, MD (1994-1995)
- Michael J. Coughlin, MD (1990-1991)
- Roger A. Mann, MD (1982-1983)
The scientific program began on Friday, September 13. Chaired by Steven L. Haddad, MD, this three-day program featured presentations from leaders in the field. Rebecca D. Costa, a sociobiologist, futurist, and author of the international bestseller *The Watchman's Rattle: A Radical New Theory of Collapse*, presented a keynote address on advancements in Big Data, genomics, and other technologies that have made it possible to predict and adapt to the future.

Cristian A. Ortiz, MD, was honored as the Kenneth A. Johnson International Speaker and presented “Is There a Rotational Component to Metatarsus Primus Varus?” during a symposium on forefoot.

Another exciting presentation in this jam-packed program came from Richard Kent, PhD, as he discussed “Lower Limb Injury Prevention Programs in the National Football League.” Dr. Kent’s background as an international expert in automotive crash injury prevention has informed the NFL’s research to improve assessment tools for sports injury protection equipment.

On Saturday, September 14, Research Guest Speaker James G. Wright, MD, MPH, FRCSC, FRCSEd, a pediatric orthopaedic surgeon and scientist known for his work to advance evidence-based orthopaedics, presented “It’s Not Okay to Practice Differently Than Everyone.”

For the second year, the Orthopaedic Foot & Ankle Foundation presented the Women’s Leadership Awards to recognize current and future female leaders in orthopaedic foot and ankle surgery. Judith F. Baumhauer, MD, MPH, received the Women’s Leadership Award and Kelly C. Stéfani, MD, PhD, received the International Women’s Leadership Award.

Annual Meeting continued to celebrate outstanding members with the Pillars of the AOFAS Awards. This Foundation initiative honors iconic surgeons who have advanced the Society and the profession through their leadership and dedication to educating foot and ankle orthopaedic surgeons. Sigvard T. Hansen Jr., MD, was inducted as the newest Pillar of the AOFAS.

You can watch highlights from Annual Meeting 2019 on the AOFAS Physician Resource Center at aofas.org/prc.

Outside of the educational program, attendees enjoyed exploring new products and services in the Exhibit Hall, industry sessions, and the mobile labs. The Celebrate Chicago event on Saturday night at the Museum of Science and Industry offered time to connect with colleagues, interact with the museum’s exhibits, and watch a special 50th Anniversary movie showcasing AOFAS history and past leaders.
AOFAS Research Forum a success

By Harold B. Kitaoka, MD, AOFAS Research Committee Chair

Nine experts from the US and abroad participated in the Research Forum at AOFAS Annual Meeting 2019, organized by the AOFAS Research Committee. The session was headlined by Research Guest Speaker James G. Wright, MD, MPH, FRCSC, FRCSEd, who addressed “How to Make a Discipline More Evidence-Based.” Didactic lectures related to “Using Research Findings in Clinical Practice” were presented by Samuel B. Adams, MD; Ellie Pinsker, PhD(c); Judith F. Baumhauer MD, MPH; Sandra E. Klein, MD; Timothy R. Daniels, MD; Jason T. Bariteau, MD; and Harold B. Kitaoka, MD.

One of the themes of the session was introducing innovative procedures and devices into clinical practice. I had the opportunity to interview Yoshinori Takakura, MD, a renowned innovator and honorary professor at Nara Medical University. Dr. Takakura emphasized our long-term responsibility to patients who undergo new procedures, including considering revision procedures before the innovative procedure is introduced, providing patient access to the surgeon postoperatively, having methods and instruments that many surgeons can use, and providing careful follow-up for at least five years.

We are grateful for the outstanding contributions of each of these authorities, who reminded us of the need for quality research in the foot and ankle specialty, and its ultimate result in improved patient care.
Thank you to our Annual Meeting Promotional Supporters

AOFAS gratefully acknowledges the following companies for contributing to the success of AOFAS Annual Meeting 2019.

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2019 marked the 50th anniversary of the AOFAS and 50 years of exceptional foot and ankle education, innovation, and camaraderie. When the Society began in 1969, there were no foot and ankle fellowships and very few instructional courses for orthopaedic surgeons interested in the foot and ankle. The establishment of the AOFAS created a space for likeminded colleagues to connect, debate, and learn from each other. In honor of this significant milestone, AOFAS has created a commemorative book celebrating the growth of the Society and the foot and ankle specialty. The high-quality, hardcover book chronicles the events, achievements, and people that have made the AOFAS what it is today. Copies of the book are available to purchase for just $25 (plus shipping).

The Society also produced a special 50th Anniversary video. Featuring interviews with AOFAS past presidents and leaders, the video showcases the rich history of the AOFAS and advancements in the field. The video can be viewed through the AOFAS website or on the AOFAS YouTube channel.

To purchase your copy of the 50th Anniversary book and watch the Anniversary video, visit aofas.org/history

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- James J. Sferra, MD, Allegheny Health Network in Pittsburgh, PA

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SPECIALTY DAY 2020

Register now for Specialty Day 2020!

Plan to join your colleagues at AOFAS Specialty Day 2020 on Saturday, March 28, 2020, at the Orange County Convention Center in Orlando, Florida. Held on the final day of the AAOS Annual Meeting, Specialty Day offers focused foot and ankle sessions to help you explore emerging surgical techniques, prepare your practice for the future, and improve outcomes for your patients.

Advance registration is now open through February 14, 2020.

This year’s Specialty Day program has been carefully crafted by the AOFAS Program Committee, led by Program Chair Scott J. Ellis, MD. Three paper sessions are planned that span topics including practice management, ankle fractures, midfoot/forefoot, pain management, hindfoot, and weightbearing CT.

The first symposium entitled “Foot and Ankle Highlights of the 2020 AAOS Meeting” provides AOFAS attendees a high-level overview of what they might have missed in the foot and ankle paper sessions or posters in the week leading up to Specialty Day.

“Assessing Outcomes in Foot and Ankle Surgery: Putting It All Together” presents the various ways that surgeons assess outcomes in the field, attempts to find strengths and weaknesses in each method, and then puts it all together to find common ground. The audience will come away with a better understanding of how to assess the literature as well as how to approach their own evaluation of their clinical results and research.

In “Why My Way of Fixing the Bunion Is the Best,” panelists face off for an exciting presentation on six different bunion surgeries including Lapidus, proximal opening wedge, proximal rotational osteotomy, SCARF, Ludloff, and distal minimally invasive. Panelists will present their reasoning for their preferred technique, review cases, and answer questions from the audience and fellow panelists.

Finally, “Total Ankle Speed Dating” offers an overview of all total ankle replacement implants currently on the market. This symposium will also include plenty of time for discussion, so attendees are encouraged to bring questions for the panelists.

For more information on the program, visit aofas.org/specialtyday.

AOFAS designates this live activity for a maximum of 7.0 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Specialty Day participants are required to submit a completed evaluation form at the end of the course in order to receive CME credit.

Register now!

Specialty Day registration and housing are managed by the AAOS. Register and reserve your hotel at aaos.org/annual.
INTERNATIONAL COLLABORATION

AOFAS partners with Colombian orthopaedic surgeons on foot and ankle education

In September, the Sociedad Colombiana de Cirugía Ortopédica y Traumatología (SCCOT) (Colombian Society of Orthopaedic Surgery and Traumatology) held its 6th International Foot and Ankle Symposium in Cartagena, Colombia. As part of the event, the organization invited AOFAS to offer a joint session on foot and ankle surgery. AOFAS Vice President Christopher W. DiGiovanni, MD, presented at the joint session along with AOFAS Treasurer Bryan D. Den Hartog, MD, and AOFAS members Judith F. Baumhauer, MD, MPH, Gregory C. Berlet, MD, and Steven L. Haddad, MD.

“Drs. Den Hartog, Baumhauer, Haddad, Berlet, and I were most grateful for the invitation to participate on behalf of the AOFAS in the first joint Colombian/US foot and ankle society session in Cartagena this past September,” Dr. DiGiovanni said. “We hope this meeting represents the beginning of many more formally combined academic exchanges between the AOFAS and our Latin American colleagues in the years ahead, and are most grateful to the Colombian Society for their warmth, hospitality, and excellent educational venue.”

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Reference
FELLOWSHIP MATCH

Fellowship interviews begin December 1

Fellowship programs offering 2021-2022 fellowship positions in the AOFAS-sponsored Orthopaedic Foot & Ankle Fellowship Match are free to begin conducting interviews on December 1. The interview period will continue through April 10, 2020. A few programs will accept applications until March, but most have much earlier deadlines, so applicants should try to complete and submit their applications as soon as possible. Individual program deadlines and interview dates are posted on the AOFAS-maintained Interview Calendar, available through a link at aofas.org/fellowshipmatch/applicants. The SF Match profile listing for each program also includes those key dates.

Currently, 48 programs are participating, offering a total of 76 positions. At press time, 75 applications had been completed and distributed.

This will be the second time that all orthopaedic subspecialties (with the exception of Hand) are using a combined, single application form, with all applicants combined into a single match process. This allows applicants to apply for and rank fellowships across multiple subspecialties, although only a small percentage applied in more than one last year.

The match is designed to be a transparent, unbiased process in which applicants are matched to foot and ankle fellowship programs on a competitive basis. Participating programs have signed an agreement with the AOFAS, and both programs and applicants are required to adhere to the Code of Conduct for Orthopaedic Fellowship Programs and Applicants. Applicants must have graduated from an allopathic or osteopathic medical school, and fellowship is dependent upon successful completion of an approved orthopaedic surgery residency program.

The Fellowship Committee, chaired by Aaron J. Guyer, MD, oversees the process to ensure the continued integrity of the Match.

For more information, visit aofas.org/fellowshipmatch. Any questions on the Fellowship Match Program may be directed to the AOFAS Executive Office at 800-235-4855 or +1-847-698-4654 (outside US) or aofasinfo@aofas.org.

Key dates
December 1, 2019 – April 10, 2020
Programs may conduct interviews
April 14, 2020
Deadline for all programs and applicants to submit rank lists
April 21, 2020
Match Day – Results posted on the SF Match website
April 23, 2020
Post-match vacancies posted
EDUCATION CALENDAR

Mark your calendar for these upcoming education events!

December 11, 2019 | 8:00 pm CT
Salvage of the Charcot Foot: Latest Techniques Webinar
Moderator: Michael S. Pinzur, MD
aofas.org/webinars

December 11-14, 2019 | Las Vegas, Nevada
Orthopaedic Summit: Evolving Techniques
orthosummit.com

December 18, 2019 | 8:00 pm CT
Physician Wellness: Outreach and Giving Back Webinar
Moderator: J. Turner Vosseller, MD
aofas.org/webinars

January 24-25, 2020 | Houston, Texas
63rd Annual Edward T. Smith Orthopaedic Lectureship:
Emerging Technology in Foot and Ankle Surgery
etsjan2020.cme.ufl.edu

January 28, 2020 | 8:00 pm CT
Orthobiologics Webinar
Moderator: H. Thomas Temple, MD
aofas.org/webinars

March 28, 2020 | Orlando, Florida
AOFAS Specialty Day 2020
President: William C. McGarvey, MD
Program Chair: Scott J. Ellis, MD
aofas.org/specialtyday

April 23-25, 2020 | Viña del Mar, Chile
International Federation of Foot & Ankle Societies (IFFAS)
7th Triennial Scientific Meeting
iffaschile2020.com

May 7-9, 2020 | Chicago, Illinois
AOFAS Advanced Foot and Ankle Course
Chair: Christopher P. Chiodo, MD
Co-chair: Peter G. Mangone, MD
aofas.org/advancedfoot

AOFAS Members: Complimentary webinars and reduced registration rates for AOFAS meetings and courses are benefits of your membership. Make sure to log into your account at aofas.org before registering.
Christopher W. Reb, DO
Having recently attended the CSCDP, I find myself with renewed energy, refined focus, and improved strategy. Indeed this event provided a much-needed and timely opportunity to take a strategic pause from the daily business of both working in and managing an academic foot and ankle service to think about the mission, what I currently bring to it, my proximate and long-term academic goals, and as I learned throughout the experience, so much more.

The entire event was truly engaging. The faculty were impressive and efficiently communicated learning points that facilitated development of a short list of essential skills, credentials, strategic partnerships, and experiences that I will need for the road ahead. Throughout these lectures, the emphasized theme was thinking programmatically. To be sure, the faculty had the invaluable ability to get to the point of what was important, and the meeting environment allowed for frank opinions about unimportant efforts and common wastes of time.

The opportunities to gain insights were everywhere. I was keenly aware of the impressively high level of the average attendee. I felt validated to have the opportunity to be among them and learned as much from my colleagues as the faculty in some regards. Indeed, much time was allocated to encouraging introspection and to cultivating peer-to-peer conversations. In these dialogues, I encountered much empathy, new ideas, and opportunities to mentor and be mentored.

Over time, I truly expect the CSCDP to prove to be among my more valuable, formative career experiences. I am indebted to the AOFAS for supporting my participation, thankful to the University of Florida for the mandate to grow academically, and appreciative of the ORS for a stellar experience. Special thanks are also due to my family for tolerating my absence and to my AOFAS colleague, Niall Smyth, for putting up with me for a weekend in Rosemont. To those thinking about applying to this program in the future, I would say, “Go for it!”

Niall A. Smyth, MD
First, I would like to thank the AOFAS for sponsoring both Chris and myself to attend the CSCDP. To be selected as one of two AOFAS members to attend and represent the Society at a prestigious multidisciplinary course is an honor. I chose to apply for the CSCDP as I wanted to expand my “research horizons.” Most of us have dabbled in some straightforward clinical research and have written a review paper or two; however, the purpose of attending this course is to extend and amplify your research skills and goals.

The program allows the attendees extensive insight into what is required to obtain extramural funding, from local grants all the way to federal dollars. One thing made abundantly clear throughout the course was that it is not easy! That being said, attending this course lays the groundwork to embark on a rewarding academic career.

The CSCDP is headlined by faculty who have been through the process of building impressive academic achievements, including obtaining R01 grants, while also maintaining busy clinical practices. It is the interaction with the faculty, as well as the other attendees, that is the most valuable asset of the program. Being able to ask questions and learn from those who have already been through the research gauntlet is uniquely helpful.

As I start my “first real job” as an attending, I will use what I have learned at the CSCDP in order to continue to grow my academic foundation and reach new goals. I unreservedly recommend applying for the CSCDP to any member of the AOFAS who is academically oriented and is ready to commit themselves to furthering our great specialty.

AOFAS members participate in Clinician Scholar Career Development Program

As part of the Society’s efforts to support early-career orthopaedic surgeons and encourage scientific investigation, AOFAS sponsored two members for the 2019 Clinician Scholar Career Development Program (CSCDP), organized by the Orthopaedic Research Society (ORS). Christopher W. Reb, DO, and Niall A. Smyth, MD, participated in the two-day workshop that offered education and guidance to build a research career. Drs. Reb and Smyth reflect on their CSCDP experiences below.
AOFAS Annual Meeting abstracts in FAI and FAO

The important research from podium presentations, posters, and eposters at AOFAS Annual Meeting 2019 in Chicago is now available. Read select abstracts in a special supplement to the November issue of Foot & Ankle International® (FAI) or read all the meeting abstracts that are freely available in Foot & Ankle Orthopaedics® (FAO) (look for the starred collection at the bottom of the FAO homepage). AOFAS members will also have access to recorded meeting sessions and handouts in the Physician Resource Center (PRC).

FAI and FAO editorial merge

FAI and FAO are now both under the direction of Editor-in-Chief David B. Thordarson, MD. In order to merge the editorial processes in preparation for the next editor-in-chief, Dr. Thordarson will oversee both journals through the end of his editorship.

L. Daniel Latt, MD, PhD, was recognized at the Annual Meeting for his important role as the FAO inaugural editor-in-chief from 2016-2019. As Dr. Thordarson said in his October FAI editorial announcing Dr. Latt’s transition to FAI/FAO Assistant Editor for Research Development and International Relations, “Dan served as the inaugural Editor-in-Chief of Foot & Ankle Orthopaedics and did an outstanding job getting the journal started. He did a tremendous amount of work getting 20 review articles published on almost all areas of foot and ankle surgery and it now has a growing number of peer-reviewed research articles being published.”

With a single editor over both journals, the emphasis is on cohesion between the journals to provide a streamlined experience for both authors and reviewers. Manuscripts that are submitted to FAI and invited to transfer to FAO are peer-reviewed by the same reviewers at both FAI and FAO. Authors who address the requested edits have a high likelihood of publication in FAO.

FAO is an ideal place to read about new ideas and to send your innovative research. FAO also invites submissions of review articles, including Topical Reviews, Systematic Reviews, Meta-analyses, and Case-series with topical reviews. FAO offers:

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Dear Colleagues,

I can think of no better time to be part of both the AOFAS and the Foundation as we just celebrated our 50th Anniversary and the successful close of Campaign 50. It was an exciting time to see colleagues and friends in Chicago for what was a wonderful meeting. I was happy to announce that we reached our $3 million goal thanks to donations from our members and industry partners. Each and every event at the Annual Meeting reminded me of the special ways in which we use this money to support our mission.

Highlights of the meeting included our Foundation Donor Reception in which we recognized our donors, industry colleagues, and recent Pillars of the Society. It was also fun to catch up with colleagues who had completed the AOFAS Traveling Fellowships during our Hermes Reception. Financial support from DJO Global made this 2019 program possible and we had another successful fellowship this fall (see page 20).

The AOFAS Resident Scholars had a very successful meeting that included a separate Resident Program on the first day and the Resident Scholar/Mentor Reception. The Foundation was able to sponsor 77 Resident Scholars to attend the meeting thanks to our industry partners: Arthrex, Inc., Stryker, and Wright Medical Group N.V. For the first time, the Resident Program included a Fellowship Fair where attendees could speak to representatives from Orthopaedic Foot & Ankle Fellowship Programs across the US. We recognize the 2019 Wright Medical Fellowship Scholarship Program, which provided $500,000 in funding to 34 fellowship programs for the education of 56 individual fellows.

The Women’s Leadership Reception was an absolute hit once again. We are grateful to the generous donations from Dr. Tom Lee, Wright Medical Group N.V., and In2Bones LLC that support the Women’s Leadership Program. Finally, the Humanitarian Services breakout session was the prime example of donations that go to the cause that originally motivated our pioneer members to establish the Foundation. We are grateful to Stryker for their support of the Overseas Outreach Project to Vietnam and Paragon 28 for their general support of humanitarian missions.

Each and every one of these events made me realize how we are constantly affirming our mission to be the premier leader in foot and ankle surgery education, patient care, and humanitarian outreach. I cannot thank our donors and colleagues enough. For a complete list of our individual and corporate donors, see pages 21-27 or visit aofas.org/foundation.

Identifying and recognizing our individual member donors will be a key initiative for the Foundation moving forward. We have established a task force to develop a new method of acknowledging your lifetime donations to the Society. There are select presidential circle levels that we will be actively recognizing through lapel pins, signage, and identification on badges at the Annual Meetings. In addition, we have established methodology to now recognize our industry partners for not only the money they directly donate to our Foundation, but also the funds they provide through other avenues such as exhibiting and promotional support.

We are in the middle of two other exciting initiatives this year. First, we recognize Dr. Roger Mann and remember his wife, Joan, for all their support to the AOFAS. The story has it that, in the early years of the Society when Dr. Mann was secretary, the whole Mann family helped out by stamping and sealing envelopes for all the mailings that went out to members. The Roger and Joan Mann Family Education Fund will be used to support in perpetuity the Roger Mann Award as well as educational endeavors through the Society. Please join me in supporting this new fund. We also recognize Dr. Sigvard Hansen for his numerous contributions to our field. He received our 2019 Pillar Award, and we continue to seek additional support in an effort to establish an endowed research fund in his name.

I only hope that 50 years down the line those who come after us will look back and be grateful for all that we have accomplished to date. Clearly, we have made great progress in expanding what we do for patients both internationally and nationally and also in educating our members. The AOFAS is a wonderful society of friends and colleagues, all with a similar desire. Please continue to help me support the mission that makes us so special. I am humbled to serve for another year towards this goal.

Sincerely,
Scott J. Ellis, MD
In October, volunteers from the Orthopaedic Foot & Ankle Foundation traveled to Kijabe, Kenya, to treat patients and train surgeons at the AIC Cure Kenya Hospital and Kijabe Mission Hospital. This mission trip was an expansion of the Foundation’s Overseas Outreach Project, which has provided humanitarian aid to underserved areas of Vietnam for nearly 20 years.

Kenya has less than 100 orthopaedic surgeons for a population of nearly 50 million and adult foot and ankle surgery is virtually non-existent. The Foundation volunteers performed life-changing surgery on many patients who had received no care or limited care in the past.

“I saw a 17-year-old patient who unfortunately developed septic arthritis in the ankle many years ago,” said Eric C. Gokcen, MD, of Langhorne, Pennsylvania, vice chair of the Foundation Humanitarian Services Committee and one of the volunteer surgeons. “When I saw her, she had significant hindfoot varus and pain. We were able to correct her deformity and are hopeful that her pain will subside as well… She told me she wants to be an orthopaedic surgeon one day.”

Volunteer surgeons each spent one week working with and teaching Kenyan attending and resident orthopaedic surgeons.

“Overall it was an excellent experience,” said volunteer Daniel C. Farber, MD, from Philadelphia, Pennsylvania. “I see fantastic potential here, both as the doctors and staff learn how we can help, and as we get more organized and recruit more locals to our mission. There is a lot to be taught and learned on both sides.”

In addition to Drs. Gokcen and Farber, Foundation volunteers included Aaron J. Gayer, MD, of Tallahassee, Florida, and Ariel Palanca, MD, of Redwood City, California.

Surgeons volunteered their time and paid for their travel to Kenya. In-country expenses were covered by the Orthopaedic Foot & Ankle Foundation, supported in part by a grant from Paragon 28.

The Foundation is currently accepting applications for the next Overseas Outreach Project to Vietnam, taking place in May and June 2020. Applications are due December 13, 2019. For more information, visit aofas.org/vietnam.
Resident Scholars attend Annual Meeting as guests of AOFAS

In September, 77 PGY-1, PGY-2, and PGY-3 residents from the US and Canada headed to Chicago, Illinois, to participate in the AOFAS Annual Meeting as part of this year’s Resident Scholarship Program. The Resident Scholars attended educational sessions and events as well as activities tailored specifically for them.

On the first day of the Annual Meeting, the Resident Scholars attended the new Resident Program. The day included presentations on introductory foot and ankle concepts from members of the AOFAS Young Physicians Committee, a Fellowship Fair with opportunities to interact with more than 30 fellowship programs, and roundtable case discussions moderated by members of the AOFAS Postgraduate Education and Training Committee.

In addition, each Resident Scholar was paired with an AOFAS-member mentor who offered valuable insight and guidance about the profession. Scholars and mentors attended an evening reception where the residents could meet and network in small groups with enthusiastic member volunteers.

The Awards & Scholarships Committee, chaired by Benedict F. DiGiovanni, MD, selected this year’s Scholars based on a competitive application process. Funding for the program was provided by the Orthopaedic Foot & Ankle Foundation, supported by grants from Arthrex, Inc., Stryker, and Wright Medical Group N.V.

The 2020 Resident Scholarship Program is open to all US and Canadian residents in good standing who are PGY-1, PGY-2, or PGY-3 during the 2019-2020 year. The application will be available in January 2020. Watch aofas.org/residentscholarship for updates.

“I have never been to a subspecialty meeting where so many members were so actively interested in teaching residents… My mentor was easy to talk to and approachable. He offered a lot of sound advice and we have plans to stay in touch in the future. You could tell he was genuinely interested in helping me with all the questions I had.”

Joseph E. Jacobson, MD
2019 Resident Scholar
Traveling Fellows visit Chicago, Rochester, and Minneapolis

Celebrating its 15th year, the AOFAS Traveling Fellowship Program provided a unique educational opportunity for mid-career AOFAS members. Through the program, Traveling Fellows visit multiple host sites where they observe in operating rooms, tour hospitals and clinics, give presentations of their own research, and learn new surgical techniques alongside accomplished host surgeons. The goals of the program are to promote professional relationships, exchange ideas, and encourage new thinking on research and clinical care topics.

The 2019 Traveling Fellows were Mohamed M. Abd-Ella, MD, of Egypt; Daniel S. Baumfeld, MD, of Brazil; Jun Young Choi, MD, of South Korea; Constantine A. Demetracopolous, MD, and Daniel Guss, MD, MBA, of the United States; and Hui Zhang, MD, PhD, of China.

The Fellows met in Chicago a few days prior to AOFAS Annual Meeting 2019 and had a welcome dinner with local AOFAS members Brian C. Toolan, MD, Kelly K. Hynes, MD, Anish R. Kadakia, MD, and Milap S. Patel, DO. The Fellows spent their first full day at Loyola University Health System, hosted by Michael S. Pinzur, MD, followed by two days at Midwest Orthopaedics at Rush University, hosted by Simon Lee, MD, Johnny L. Lin, MD, Kamran S. Hamid, MD, MPH, and George B. Holmes, MD.

Benedict F. DiGiovanni, MD, chair of the Awards & Scholarships Committee welcomed the Fellows to the AOFAS Annual Meeting and presented them with their plaques during the awards ceremony. Following Annual Meeting, the Fellows traveled to Rochester, New York, where they once again saw Dr. DiGiovanni, along with his University of Rochester School of Medicine colleagues Judith F. Baumhauer, MD, MPH, A. Samuel Flemister, MD, Irvin Oh, MD, and John P. Ketz, MD. The Fellows spent two days learning from a variety of cases in the OR and enjoyed time outside in the Northeast.

The last stop for the Fellows was Minneapolis, Minnesota, where they were hosted by AOFAS Immediate Past President J. Chris Coetzee, MD, at Twin Cities Orthopedics. The Fellows spent their first day in clinic with Dr. Coetzee followed by a tour of the facilities and presentations of their own research. AOFAS members Patrick B. Ebeling, MD, Jeffrey D. Seybold, MD, and William M. Engasser, MD, joined the group for dinner that night. The Fellows spent the next day in the operating room with Dr. Coetzee learning from a flurry of cases!

“The Traveling Fellowship is a unique opportunity to learn from preeminent faculty across the country,” said Dr. Guss. “But the true magic lies in the other Fellows. It is a once-in-a-lifetime opportunity to spend time surrounded by a diverse and amazing group of people from all over the world — professional colleagues who I now have the privilege to call lifelong friends.”

Funding for the Traveling Fellowship Program is provided by the Orthopaedic Foot & Ankle Foundation, supported by a grant from DJO Global.

AOFAS Active, Candidate, and International Members age 49 or under at the time of application are encouraged to apply for the 2020 Traveling Fellowship! Travel will be centered around AOFAS Annual Meeting 2020 (September 9-12 in San Antonio, Texas). Applications are due January 8, 2020. Learn more and apply at aofas.org/travelingfellows.
Thank you!

At AOFAS Annual Meeting 2019, the Orthopaedic Foot & Ankle Foundation celebrated the successful completion of Campaign 50, the five-year campaign to raise $3 million for our valuable research, education, and humanitarian service programs. We thank the following individuals for their charitable contributions to Campaign 50.

This list reflects outright gifts and multi-year commitments made between January 1, 2014, and November 15, 2019.

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FALL 2019
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AWARDS AND SCHOLARSHIPS
Benedict F. DiGiovanni, MD, Chair
Michael P. Clare, MD, Vice Chair
Oversaw the Traveling Fellowship Awards Program: reviewed applications, selected six award recipients, and coordinated visits to leading foot and ankle institutions in three cities. Reviewed Resident Scholarship applications and selected 77 residents to attend Annual Meeting and participate in the program. Recruited AOFAS-member mentors for Resident Scholars.

EDUCATION
G. Andrew Murphy, MD, Chair
Thomas M. Hearty, MD, DPT, Vice Chair
Provided oversight and direction for Specialty Day, Annual Meeting, Surgical Complications Course, OLC Hands-on Course, and webinars. Expanded webinar program to include allied health and physician wellness programming. Expanded the co-branding program and vetted all applications.

EVIDENCE-BASED MEDICINE
Phinit Phisitkul, MD, Chair; Patrick B. Ebeling, MD, Vice Chair
Updated position statements on DVT and clinical rating systems. Collaborated with AOFAS PRC, FAI/FAO, and Research Committees to develop strategy for how the AOFAS will develop and disseminate evidence-based information in the future.

FAI CME
Patrick B. Ebeling, MD, Chair
Christopher D. Kreulen, MD, MS, Vice Chair
Developed questions and launched the sixth FAI CME exam, a 100-question exam based on 2018 FAI articles. Maintained access to the 2017 FAI CME exam. Provided members and subscribers with the opportunity to earn up to 20 scored and recorded CME hours of AMA PRA Category 1 Credit™, 10 credit hours per exam.

FAI EDITORIAL BOARD
David B. Thordarson, MD, Chair and FAI Editor-in-Chief
Managed the FAI editorial, peer review, and disclosure process for a record-high number of submitted manuscripts, with podcasts for each issue’s lead article, and invited operative technique videos for relevant articles. Reviewed 954 original articles and published 218 articles in 2018. Established new Electronic Media Editorial Board to enhance the journal’s online/social media presence.

FAI/FAO MANAGERIAL BOARD
James W. Brodsky, MD, Chair
Provided financial oversight for FAI and FAO and managed the Society’s relationship with the journal publisher. Coordinated FAO editorial transition to FAI editor-in-chief ahead of the new FAI editor search.

FAI EDITORIAL BOARD
L. Daniel Latt, MD, PhD, Chair and FAO Inaugural Editor-in-Chief
Managed the editorial, peer review, and disclosure process for FAO, the Society’s open access journal. Published 553 Annual Meeting and Specialty Day abstracts and 31 articles in 2018. Oversaw FAO Essential Reviews, including two printed supplements.

FELLOWSHIP
James R. Holmes, MD, Chair; Aaron J. Guyer, MD, Vice Chair
Developed the administrative framework of the new Wright Medical Fellowship Scholarship Grant and selected programs to receive funding. Launched a well-received pilot Fellowship Fair at the Annual Meeting. Provided oversight of the Orthopaedic Foot & Ankle Fellowship Match Program.

FINANCE
Bryan D. Den Hartog, MD, Chair and Treasurer
Managed and supervised financial operations and policies. Created new investment policies and structure. Created financial dashboard reporting to monitor key performance indicators.

HEALTH POLICY
Casey J. Humbyrd, MD, Chair
Christopher P. Chiodo, MD, Vice Chair
 Represented the AOFAS in the AMA House of Delegates on policy initiatives including pushback on the universal billing benchmarks and the 25 modifier. Established communication with state societies to disseminate state legislative updates.

HUMANITARIAN SERVICES
J. Turner Vosseller, MD, Chair; Eric C. Gokcen, MD, Vice Chair
Oversaw the Overseas Outreach Project to Vietnam with four surgeon teams and planned the first humanitarian mission trip to Kenya with two surgeon teams in October 2019. Evaluated new sites for 2020. Presented a Humanitarian Service Symposium at the Annual Meeting.

AOFAS committees play a vital role in the Society’s work to build a strong specialty and meet the evolving needs of our members. The AOFAS is grateful to our committee members for volunteering their time and expertise!
MEMBERSHIP
Richard A. Zell, MD, Chair; Brett R. Grebing, MD, Vice Chair
Reviewed membership applications monthly and recommended qualified applicants in all categories. Established MD Affiliate membership category for non-surgeon MDs and DOs. Implemented multiple improvements in the member experience through bylaw changes. Continued outreach initiatives for International and Allied Health Members. Began exploring options for medical students to become involved in the Society.

OFAR MANAGERIAL BOARD
Kenneth J. Hunt, MD, Chair; Scott D. Karr, MD, Vice Chair; Kevin L. Kirk, MD, Co-Vice Chair; Christopher W. DiGiovanni, MD, Co-Vice Chair
Monitored existing site enrollment to continue data collection with the registry platform. Met with governmental bodies regarding orthopaedic registries and advocated for the use of patient-reported outcomes with members and the healthcare community.

PHYSICIAN RESOURCE CENTER
Joseph S. Park, MD, Chair; Christopher W. Reb, DO, Vice Chair
Launched new learning management system. Oversaw a comprehensive process to tag content for easier search functionality. Continued a systematic review of all current content and materials on the PRC. In conjunction with the FAI CME Committee successfully moved the FAI CME Exams to the PRC.

POSTGRADUATE EDUCATION AND TRAINING
Thomas G. Harris, MD, Chair
Todd A. Irwin, MD, Vice Chair
Conducted the fourth annual session of roundtable case presentations for residents at Annual Meeting. Provided continued oversight of the Visiting Professor Program. Contacted orthopaedic residency programs to collect data about their foot and ankle education.

PRACTICE MANAGEMENT
Raymond J. Sullivan, MD, Chair; John A. DiPreta, MD, Vice Chair
Conducted a successful Coding Webinar and Practice Management Symposium. Continued committee member representation on the AMA CPT and RUC bodies. Provided coding advice on a quarterly basis in the InStride newsletter.

PROGRAM
Steven L. Haddad, MD, Chair
Developed content for Specialty Day, Annual Meeting, and OLC Hands-on Course. Ranked abstracts and selected papers for podium presentations, poster boards, and eposters. Selected best papers for the Mann, Goldner, and IFFAS Awards.

PUBLIC EDUCATION
F. Ray Nickel, MD, Chair; David A. Porter, MD, PhD, Vice Chair
Oversaw the redesign and relaunch of the FootCareMD patient education website, including the development of an interactive foot pain diagram. Reviewed and revised articles to ensure text reflects current information. Wrote new articles on emerging patient education topics.

RESEARCH
Harold B. Kitaoka, MD, Chair; John P. Ketz, MD, Vice Chair
Critiqued a record 36 research grant applications, as well as applications for research collaboration and the ORS Clinician Scholar Career Development Program. Conducted a new study of past AOFAS research grant recipients demonstrating the success of the program in presentations, publications, and obtaining subsequent extramural funding. Published position statement on Patient Reported Outcome Measures. Made recommendations to the Research Council for sponsored research.

YOUNG PHYSICIANS
Pamela C. Luk, MD, Chair
Amgad M. Haleem, MD, PhD, Vice Chair
Initiated AOFAS Boards review to help prepare candidates with a foot and ankle focus for ABOS Part II Oral Boards. Organized the first Resident Program at Annual Meeting. Launched the Case Based Discussion Forum on AOFAS Connect. Created podcasts for resident education. Set up dialog between AOFAS committees by appointing inter-committee liaisons.

Thank you to the AOFAS special committees and workgroups!
- Committee on Committees
- Nominating Committee
- FAI Electronic Media Editorial Board
- Abstract Reviewers Workgroup
- Allied Health Workgroup
- Consumer Awareness Workgroup
- 50th Anniversary Workgroup
- Women’s Leadership Workgroup
Modifier 51 and 59: How and when to use and what to expect when you do

By John A. DiPreta, MD, AOFAS Practice Management Committee Chair and AOFAS AMA/CPT Advisor

The proper use of modifiers 51 and 59 can be confusing as to their utilization and application.

**Modifier 51:** “When multiple procedures other than E/M services are performed at the same session by the same individual. The primary procedure or service may be reported as listed. The additional procedure(s) or service(s) may be identified by appending modifier 51 to the additional procedure or service codes.”

The traditional use of this code was to inform payors that two or more procedures are being reported on the same day. It should be noted that some payors may not accept or require the use of the 51 modifier as they are programmed to automatically apply the multiple procedure reduction to the lesser valued codes.

When using the 51 modifier, no special rules to the reporting of code combinations can apply, the CPT codes cannot be add-on or 51 modifier-exempt codes, and the CPT codes must be standalone procedures and not inclusive to other procedures used at the same time.

For these reasons, the 51 modifier may have limited application. If multiple procedures are performed with their respective separate and distinct diagnostic codes, the multiple procedure reduction will apply. There may be regional differences among payors as to whether or not they recognize the 51 modifier.

**Modifier 59:** “It may be necessary that a procedure or service was distinct or independent from other non E/M performed on the same day. Used to identify procedures that are not normally together. It must support a different session, different procedure or surgery, different site or organ system, separate incision/excision, separate lesion or separate injury (or area of injury) not ordinarily encountered or performed on the same day by the same individual.”

The 59 modifier is reported with a CPT code combination when a coding rule has to be met, when another more specific modifier will not explain the procedure to the payor, or when the code combination is correct but the payor has a reimbursement edit in place. According to CPT, modifier 59 will be used when no other modifier can be utilized to describe the procedures performed or circumstances of the situation.

In 2015, CMS added a subset of codes to specifically address the utilization of the 59 modifier and in particular, XS. The XS subset is defined as separate structure, a service that is distinct because it was performed on a separate organ/structure. The rules for the use of this designation would be the same as those for the 59 modifier. It may be submitted for Medicare claims in place of the 59 modifier.

For foot and ankle procedures in which multiple procedures are done at the same setting, on multiple locations, the 59 modifier would be applied:

- **Hallux valgus** (28292, 28296, 28295, 28297, 28298, 28299) and lesser toe corrections (28285, 28270)
  - Coders should also submit the designated T codes for the individual toes.
- **Calcaneal osteotomy** (28300)
  - While Medicare will not reimburse for a double osteotomy, non-Medicare payors would allow for use of the 59 modifier when documentation is specific (e.g., medial displacement calcaneal osteotomy, lateral column lengthening, through two separate incisions)

In addition, procedures that are listed in CPT as “separate procedures” would require the 59 modifier. Examples include:

- **28270:** capsulotomy with or without tenorrhaphy
- **28310:** osteotomy, shortening proximal phalanx of first toe
- **28315:** sesamoidectomy, first toe
- **27606:** Achilles tenotomy, with general anesthesia

It is imperative that members of your coding team and business office communicate with your payors for the appropriate use of these modifiers.

**Did you know?**

Past Coding Corner articles and other coding and practice management resources are online at aofas.org/practicemanagement (member login required).

**References:**

- LeGrand M. The Differences Between Modifiers 51 and 59. AAOS Now, 6/1/2013
- LeGrand M. Modifier 59 Revisited. AAOS Now, 3/1/2015
- CPT 2019 Professional Edition
Welcome to the new AOFAS Members

The Board of Directors approved 142 new members in July, August, September, and October. We welcome them to the membership and thank them for their commitment to the Society and the specialty.

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- Karl J. Henrikson, MD
- Adam M. Huff, MD
- Milap S. Patel, DO
- Adam P. Sangeorzan, MD
- Danielle M. Thomas, MD
- Patrick J. Ward III, MD

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- Éder Ferreira Moreira, MD
- Langga Sintong, MD

**Surgeon in Training**
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Kar Hao Teh, MRCSEd, MBChB, FEBOT, FRCS(Tr&Orth)
Feras Waly, MD

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