This past year has been one of growth, expansion and innovation in many areas by both AOFAS members and staff. We have seen exciting changes taking place in education, membership, humanitarian programs and governance policies.

The Foot & Ankle Fellowship Match Program was reinstituted and administered by the National Resident Matching Program (NRMP). AOFAS celebrated the 10th Anniversary of its Research Grants Program with the awarding of six grants to members. The recipients of our 2007 Traveling Fellowship Awards Program will have the opportunity to participate in the Annual Summer Meeting in Toronto before they begin their visits to their hosts in Rochester, Boston, New York, Philadelphia, Washington, DC and Baltimore. Please take the time to get to know them in Toronto. Two successful educational programs were instituted: A Comprehensive Update on the Management of Sports Injuries of the Foot & Ankle was held in the Chicago area in April and the 37th Annual Specialty Day Program was presented in San Diego in February.

Our members participated in the AMAs Relative Value Update Committee (RUC) surveys for data on “physician work” recommendations for relative value units. A newly created AOFAS Task Force on Evidence-based Practice was created with Mark Easley, MD as its chair. Dr. Easley will also be serving on the AAOS Evidence Analysis Committee. We have seen exciting growth in our membership with many of our younger members elevating in status. A successful Membership Needs Survey was conducted in the fall offering valuable feedback on the goals of our members for AOFAS. Our Board of Directors adopted a position statement on podiatry which was presented to the State Societies Strategy Session on May 2 in Washington, DC as part of the AAOS National Orthopaedic Leadership Conference.

Our sixth successful AOFAS Overseas Outreach Project to Vietnam, supported by the OEF, took place in May and June with four AOFAS members volunteering for the first time to participate for two weeks in this humanitarian and educational outreach initiative. They included Meir Nyska, MD, E. Greer Richardson, MD, Michael Romash, MD, and Steven Sheskier, MD. New OEF individual and corporate giving brochures were

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**F&A Match Day results**

Results of the long awaited AOFAS-sponsored Orthopaedic Foot and Ankle Fellowship Match were announced May 23 to fellowship applicants and program directors. The match, administered by the National Resident Matching Program (NRMP), was formalized nearly one year ago when 42 of 43 fellowship directors signed program agreements with AOFAS committing to abide by the parameters of the reinstituted match. Fellowship directors also agreed to conditions set by the NRMP.

The AOFAS match offered 60 foot and ankle fellowship positions at 37 certified programs across the country. Due to loss of funding, relocation of fellowship directors, or other unforeseen circumstances, a handful of programs that had originally committed to participate in the match dropped out prior to Match Day. The Orthopaedic Foot and Ankle Fellowship Match is a component of the NRMP’s Combined Musculoskeletal Match, which includes hand surgery fellowships offered by orthopaedic, general surgery, and plastic surgery programs.

For the 2008-09 fellowship period, the foot and ankle program results show that 51% or 19 programs filled all of their positions, 14% or 5 programs filled some of their positions, and 35% or 13 programs did not fill their one available position. Of the 60 certified positions offered, 68% or 41 positions filled through the match. Two applicants did not match, one of whom accepted an unmatched position leaving 17 positions still available.

From the applicant statistics, 80% or 33 of the matched applicants are US medical school graduates. One US foreign medical school graduate matched, as did six osteopathic medical school graduates and one foreign medical graduate. While a number of positions in the 2008-09 match did not fill, more foot and ankle fellowship positions were offered than in previous years. Having the match sponsored by the AOFAS and run by the NRMP leveled the playing field, and new fellowship programs offered positions in this year’s match. Looking at statistics collected from fellowship directors, 34 out of 52 (65%) available positions were filled for 2007-08 fellowships, and for 2006-07 there were 44 out of 53 (83%) slots filled. However, some of these 2006-07 and 2007-08 fellowship positions were not filled until less than 14 months prior to the scheduled which will likely also be the case for some of the unfilled 2008-09 positions.

See President’s Message, page 2

See Fellowship Match, page 8
President’s Message
continued from page 1

created and sent to both our membership and our corporate supporters.

Steps were taken to implement an AOFAS Military Visitation Program with our initial member visit to Walter Reed Army Medical Center in April. This well received program offered our members the opportunity to witness firsthand the impressive care given to our wounded soldiers by dedicated US military orthopaedic surgeons. Because of the success of this first program, we are exploring dates in 2008 for visitation programs at other military hospital locations.

AOFAS members were highlighted in two projects on the treatment of plantar fascitis co-sponsored with the AAOS. They hit the airwaves with an interview with Donald Bohay, MD, heard by 6,000,000 listeners and a TV spot done with Benedict DiGiovanni, MD, reaching an audience of over 10,000,000. Updated patient-education brochures were created by the Public Education Committee and introduced at Specialty Day. Significant dates in the history of the Society have been submitted for inclusion in the 75th Anniversary Celebration Timeline of the AAOS.

The international flavor of our summer meeting in Toronto, Ontario, Canada, chaired by Chris DiGiovanni, MD, promises to be an outstanding one both socially and educationally. Please join your colleagues and friends for a wonderful three days of learning. It offers several innovative programs and features in addition to the Pre-meeting Course chaired by Mark Easley, MD. These include: Best Technique Tips Awards; new one-hour industry sessions; and educational courses on Tips for Interacting with the Media; Practice Management; and CPT Coding for Foot and Ankle Procedures.

This past year has been an extremely fulfilling one for me. I am proud to be a member of this organization populated by so many dedicated, hardworking and talented people who have taken the needed steps to look to our future. Thank you for the opportunity to have served on the Board of Directors as a member and especially this year as president.

Lowell H. Gill, MD, President

E. Greer Richardson, MD, will retire as Editor-in-Chief of Foot & Ankle International

E. Greer Richardson, MD, has announced that he will retire as Editor-in-Chief of Foot & Ankle International. Dr. Richardson intends to officially conclude his distinguished editorial role effective the end of this calendar year and will shift back to full-time clinical practice at the Campbell Clinic in Memphis, TN.

The AOFAS wishes to express its extreme gratitude and immense appreciation to Dr. Richardson, who has ably served as the fourth and current Editor-in-Chief of the Journal. He began as editor of FAI in January 2005, taking over from Lowell Lutter, MD, who preceded him in the position.

It is hoped that the incoming Editor will transition to the position during the latter months of 2007 and assume full responsibility by January 1, 2008. The FAI Editor Search Committee, comprised of James Brodsky, MD, chair; Charles Saltzman, MD, co-chair; and committee members Walter Pedowitz, MD, Andrew Sands, MD, Bruce Sangeorzan, MD, and E. Greer Richardson, MD (ex-officio, non-voting), has been appointed by the AOFAS Board of Directors, and a position description was included in the announcement sent to the membership by broadcast e-mail. Applications from Active Members for the open position were accepted through June 29, 2007 and interviews of candidates will be conducted at the Summer Meeting on July 13 in Toronto, culminating in a recommendation to the FAI Managerial Board and the AOFAS Board of Directors.

E. Greer Richardson, MD, Editor-in-Chief of Foot & Ankle International.
Representing AOFAS at the NOLC and State Strategies Session

The National Orthopaedic Leadership Conference (NOLC) has become an annual Washington, DC pilgrimage for leaders in organized orthopaedics. This gathering brings together members of the Board of Specialty Societies (BOS) and the Board of Councilors (BOC) – two from each orthopaedic specialty and proportional representation from each state orthopaedic society, respectively, plus the AAOS Board of Directors, OrthoPAC, leadership mentors, and various others within orthopaedic circles. This year’s program also included the State Societies Strategy Session and of particular interest to AOFAS...a symposium on podiatry.

State issues

The State Societies Strategy Session focused on two important state orthopaedic issues – podiatry and physical therapy. The two-hour podiatry symposium included a presentation by John Early, MD, AOFAS Health Policy Chair, on podiatry education and training as well as an introduction of the recently adopted AOFAS position statement on podiatry. Dr. Ross discussed the California and Tennessee experience with podiatry scope of practice, and David Teuscher, MD of Texas and Alan Routman, MD of Florida presented summaries of activities in their respective states. A similar panel on physical therapy scope of practice was also presented.

Capitol Hill visits

Visits on Capitol Hill to meet with elected officials and their staff focused on delivering three messages to Members of Congress:

- Fix the flawed Medicare formula that threatens patient access to care and stop the projected 10% payment reduction in 2008.
- Support voluntary Medicare quality reporting that focuses on meaningful improvements to patient care and slow down the process to a realistic implementation timeline.
- Recognize the prevalence of orthopaedic injuries in the conflict in Iraq and Afghanistan and support increased Congressional funding for Dept. of Defense musculoskeletal research funding.

Another goal of the visits was for Academy members to build relationships with Members of Congress and become a resource on health care issues.

Board of Specialty Societies

Of particular interest at the BOS meeting was the report on CPT/RUC. AAOS works cooperatively with OTA, AFOAS, AANA, AAHKS, NASS, ASSH, AANS/CNS and APMA on work value recommendations for new and revised codes. The RVUs for 54 CPT fracture codes (including 22 F&A codes) were reviewed by the RUC as part of the 2005 five-year review. In addition, 25 new codes (8 for F&A) were submitted to the CPT Panel, as were 13 revised codes (3 for F&A). All AAOS recommendations were approved by the RUC, however the final results will not be known until CMS releases the 2008 proposed physician fee schedule in August. Drs. Tye Ouzounian and Walter Pedowitz have worked hard to successfully bring new F&A codes and revalued codes through the CPT and RUC process.

AOFAS representatives to the BOS are Steven Ross, MD, President-elect, and Bryan Den Hartog, MD, a Member-at-Large on the AOFAS Board of Directors. Dr. Ross also serves as chair of the BOS Health Policy Committee.
AOFAS Military Visitation Program

On April 13, 2007, 18 members of the AOFAS and members of the military participated in a new AOFAS educational initiative: a Military Visitation Program at Walter Reed Army Medical Center in Washington, DC. The idea for this program was proposed by Lowell Gill, MD, in his Presidential Inaugural Address at the 2006 AOFAS Annual Summer Meeting, “My proposal to the military orthopaedic surgeons at Walter Reed is that the AOFAS establish a visitation program with their facility for the exchange of ideas, communication among specialists, and to better appreciate the sacrifices of our young soldiers.”

The program was chaired by AOFAS members Donald Bohay, MD, LTC Scott Shawen, MD, of Walter Reed Army Medical Center (WRAMC) and LCDR John Keeling, MD, of National Naval Medical Center (NNMC). Faculty included LCDR John Forsberg, MD, of NNMC, MAJ (P) David Rozelle, of WRAMC, and CPT Adam Groth, MD, WRAMC. This CME interactive activity began with an initial fact-finding visit by AOFAS members and staff leading to its launch in April. The AOFAS participants were provided a first-hand account into the wide range of support soldiers receive following their injuries and during their rehabilitation. The program included a morning report on the trauma cases admitted the week before followed by case presentations involving difficult foot and ankle reconstruction problems. For many attendees, the highlights of the visit were the case presentations with two injured Marines and their families present. As Dr. Bohay said, “It was special because we saw these young men as not only patients with horrible injuries but survivors in a battle for our freedom and security.”

The need for ongoing care for these soldiers once they return to their homes was another message taken away from the visit. To continue this needed care, attendees urge that all orthopaedic surgeons be encouraged to accept TriCare/Champus insurance for these military veterans. The AAOS is calling for Congress to initiate substantial increases in funding for the Department of Defense (DoD) musculoskeletal research programs given the prevalence of orthopaedic injuries. Reaction from this first visitation ranged from “excellent speakers,” “completely amazing,” to “recommend future sessions.” Due to its success, the AOFAS is hoping to expand upon this program with future visits to other military medical institutions in early 2008.

AOFAS 2007-2008 meetings calendar

Listing is current as of June 7, 2007. Information and registration: www.aofas.org. Members, please login to register online.

July 13-15, 2007 – ON-SITE REGISTRATION AVAILABLE
AOFAS 23rd ANNUAL SUMMER MEETING
(Friday-Sunday, July 13-15)
Pre-meeting Course: Complex Reconstruction of the Foot and Ankle (Thursday, July 12)
The Westin Harbour Castle, Toronto, Ontario, Canada
• Passports required for air travel. If you live outside the US and require a visa to enter Canada, contact the AOFAS office to obtain the appropriate documentation.
• Registration for the Family Gala Event (Hockey Hall of Fame) and optional afternoon tours available on-site, subject to availability.

September 8-9, 2007 – REGISTRATION IN PROGRESS
AANA MASTERS EXPERIENCE: FOOT & ANKLE ARTHROSCOPY
Orthopaedic Learning Center, Rosemont, Illinois
Co-sponsored by AANA and the AOFAS
AANA Registration and Information: www.aana.org; info@aana.org; 847-292-2262

September 13-15, 2007 – REGISTRATION IN PROGRESS
COMPLETE FOOT CARE COURSE
Rio All-Suite Hotel & Casino, Las Vegas, Nevada
Developed for the orthopaedic surgeon and allied health personnel. Printed brochure mailed to AOFAS Members mid-June and is posted at www.aofas.org.

November 30 – December 1, 2007 – REGISTRATION AVAILABLE SOON
THE ROAD TO NOWHERE: COMPLICATIONS IN FOOT AND ANKLE SURGERY
Finding the Right Path to Surgical Success
Astor Crowne Plaza, New Orleans, Louisiana
Program information coming by mail in August and will be posted to www.aofas.org.

March 8, 2008 – SAVE THE DATE
SPECIALTY DAY
San Francisco, California
Registration information forthcoming from the AAOS or visit www.aaos.org.

May 1-3, 2008 – SAVE THE DATE
ADVANCED FOOT AND ANKLE COURSE
San Francisco, California

June 25-28, 2008 – SAVE THE DATE
AOFAS 24th ANNUAL SUMMER MEETING and Pre-Meeting Course
Marriott Denver City Center, Denver, Colorado

October 2-4, 2008 – SAVE THE DATE
COMPLETE FOOT CARE COURSE
Boston, Massachusetts

Watch for new programs in development and additional information at www.aofas.org.
Las Vegas to host Complete Foot Care Course

The AOFAS Complete Foot Care Course will be held September 13-15, 2007 in Las Vegas, Nevada at the Rio All Suite Hotel & Casino.

This comprehensive, multi-disciplinary course will emphasize the team approach to foot and ankle care and is designed for physicians and other health care professionals involved in foot care including nurses, physical therapists, physician assistants, orthopaedic technicians, prosthetists/orthotists and pedorthists.

“You and your clinic staff will want to attend this team-based course focusing on state-of-the-art nonoperative foot and ankle treatment options. The design of this course will maximize and enhance clinical skills in the management of your patients with foot and ankle disorders and is a key educational opportunity to demonstrate and apply diagnostic skills to your staff and allied health professionals,” says Troy Watson, MD, Las Vegas, Nevada, course chair. “It is the integration of all aspects of foot and ankle care through the use of this multidisciplinary approach that makes this course unique,” continues Dr. Watson.

Course topics will include the evaluation and office treatment of common causes of forefoot, midfoot and hindfoot pain, the assessment of foot mechanics, the aging foot, the role of shoewear and orthotic devices in treating disorders, foot and ankle injuries, and foot complications in diabetes mellitus. In general sessions, members of the faculty, including physicians, nurses, physical therapists, orthotists, and pedorthists, will discuss their roles in the integrated care of a wide variety of common foot and ankle ailments. Hands-on afternoon breakout sessions will address aspects of foot and ankle care relevant to each participant’s specific practice and provide an environment conducive to interaction and learning. Case presentations will demonstrate treatment principles and facilitate open discussion.

New Fall course focuses on complications

Don’t expect to attend the new AOFAS course entitled The Road to Nowhere: Complications in Foot and Ankle Surgery Finding the Right Path to Surgical Success, November 30 – December 1, 2007, New Orleans, Louisiana, and hear about the history of treatment, conservative management, and technical descriptions of procedures. “This is an entirely new course, with a fresh approach to analyzing and managing complications,” says Program Chair Steven Haddad, MD. This highly interactive course will instead focus solely on complications through a series of didactic lectures and case-based discussions. The didactic component will illustrate evidence-based information on managing complications, supported by the case-based ideas developed in practical clinical practice. Each instructor will begin by discussing both predictable and unpredictable complications from a particular procedure, how to avoid them, and how to manage them should they occur. “If the path becomes too rocky for safe travel, unmanageable problems will be dealt with candidly,” predicts Haddad.

Typical types of cases that will be discussed include: the multiple surgical failure patient; salvage options; and the most common complex scenarios that foot and ankle specialists face.

“I want the audience to bring their difficult complications and have the opportunity to use the faculty as a sounding board in finding a successful resolution,” continues Dr. Haddad. Topics will be inclusive under the broad categories of ankle, hindfoot, midfoot, and forefoot surgeries.

This is a program geared towards the seasoned foot and ankle surgeon who finds themselves facing a surgical complication resulting in a particularly challenging case, or consistently gets difficult referrals from fellow orthopaedic surgeons. However, this program will have equal value for the surgeon interested in expanding their scope of practice into foot and ankle surgery. In this latter instance, understanding complications in advance of undertaking procedures will allow for better patient education and better patient management. Participants will have ample opportunity to discuss their own difficult complications and have a strong faculty to assist them with a satisfactory resolution. This will be an exciting and practical course that you won’t want to miss.

Confirmed faculty to date:
Steven L. Haddad, MD, Chair
Robert B. Anderson, MD
J. Chris Coetzee, MD
Mark E. Easley, MD
Jeffrey E. Johnson, MD
Mark S. Myerson, MD
Charles L. Saltzman, MD

AAOS Television Media Package

As of May 24, 2007, the AAOS/AOFAS joint media project on stretching exercises for plantar fasciitis has had 312 airings on 216 stations with an audience of 10,022,877. The most recent airings have been on WEVV/CBS Evansville, IN.
AOFAS project offers challenges and interesting times
AOFAS celebrates its 6th successful Outreach Project to Vietnam

You have heard of interesting vacations in Europe, boat cruises through Alaskan waters, mountain climbing, and kayaking in scenic places, however, the AOFAS has an even better adventure in mind for its members. It offers beautiful scenery, foreign language and unusual foods, and involves stepping out of your comfort zone — both clinically and personally. It also affords the opportunity to do something truly special for others and return home with memories that will last a lifetime.

The project has come a long way
The AOFAS Annual Overseas Outreach Project to Vietnam began in 2000 with Dr. Pierce Scranton’s initial fact-finding trip to explore the possibility of treating disabled children and landmine victims in Vietnam. Working together with the Seattle-based Prosthetics Outreach Foundation (POF), which handles all in-country logistics for this project, the Vietnamese Ministry of Labour, Invalids and Social Affairs, and the Vietnamese Ministry of Health, this AOFAS initiative has developed into an annual project that continues to attract member volunteers.

To date 17 AOFAS members have generously volunteered their time and paid their own travel to Vietnam to participate in the project. AOFAS has co-sponsored five educational conferences in Hanoi, and the number of patients benefiting from free surgery now tops 350. The dream of taking AOFAS to a new level of outreach, education and humanitarian service by providing free surgery to Vietnamese children and adults with deformities and disabilities has just marked its sixth successful year.

Hospitals, families and children
Funded by the Outreach & Education Fund (OEF) through corporate and member donations, this year’s AOFAS mission trip began in mid-May with the arrival in Hanoi of team one — E. Greer Richardson, MD of Memphis and Steven Sheskier, MD of New York. The two first-time project volunteers spent time at the provincial orthopaedic rehabilitation center in Vinh City, located on the coast about 300 km south of Hanoi. Families, many of whom had traveled from outlying villages, greeted them with warm smiles and waited patiently... hoping their children would be selected for surgery.

At times it seemed as if every Vietnamese family had a child with a deformity, many of which are not typically seen in practice in the U.S. With the aid of POF’s Vietnamese project coordinator and interpreter, Mrs. Rose Hong, the AOFAS surgeons saw patients with their Vietnamese orthopaedic counterparts, and then worked side-by-side with them in the OR.

Both in Vinh City and in Hanoi the AOFAS members had the opportunity to visit orthopaedic surgeons at local trauma hospitals and children’s hospitals. The wards were filled beyond capacity with patients in casts and splints, while additional patients and families lined the hallways waiting to be seen. With motorbikes as the primary mode of transportation in Vietnam, lower extremity trauma is high, and according to one government official, 6% of Vietnam’s 83 million people are disabled.

During their second week in Vietnam, Drs. Richardson and Sheskier traveled to the orthopaedic rehabilitation center in Ba Vi, west of Hanoi, where they saw patients and operated with local orthopaedic surgeons. There they also were able to visit an orthopedic rehabilitation component factory and a prosthetic leg manufacturing facility, both initiatives assisted by the POF.

Educational conference
The full AOFAS contingent converged in Hanoi to participate in the educational conference co-sponsored by AOFAS, POF, and the Vietnamese Ministry of Health. Team two included Michael Romash, MD of Chesapeake, VA, Meir Nyska, MD of Sde-Nitzan, Israel, and team leader Naomi Shields, MD of Wichita, KS. Pierce Scranton, MD, representing POF, arrived from Seattle to join the group.

The Fifth Annual American Vietnamese Seminar on Surgery of the Lower Extremity on June 2 brought together more than 165 Vietnamese orthopaedic surgeons.

They were advised to bring along their own gloves, sutures, masks, and scrubs. Some brought instruments to leave behind, while others brought surgical texts as gifts. The donations were much appreciated.

This year’s mission members had performed surgeries in third-world countries previously, but their motivations for volunteering for the AOFAS project were each different.

Dr. Nyska, who had been to Vietnam three times previously, stated that his goals for this trip were “to gain experience and solve complicated problems in foot and ankle and lower extremity trauma care.” Drs. Romash and Nyska performed a through-the-knee amputation on a girl who was crawling on a flexed knee leg. Prior to the surgery she was confined to her home in the mountains, and now she will get a prosthesis and be able to walk. “This was one of our highlights,” he says.

A retired career military medical officer, Dr. Romash says, “I wanted to gain insight into the practice of orthopaedics away from the US to compare and contrast it with our care. I wanted to see how this compares with what I was exposed to in the Marshall Islands with the US Army 20 years ago.”

Dr. Richardson’s goal was simple: “To say thank you to Pierce” for his vision in setting up this project for the AOFAS.

Dr. Sheskier says, “My motivation in volunteering for the AOFAS project was to gain an increased understanding of the needs of a third-world country. I was also interested in increasing the friendship between our countries. Having lived through the time of the Vietnam War, I feel we still have a debt to this country. We have so much and there are places that have so little. It is time to give back. This trip was the best and most organized experience I have had in Vietnam.”

Step up to a challenging experience

To apply for a future AOFAS Overseas Outreach Project, visit the aofas.org Web site, enter your member login information and follow the links under Outreach & Education Fund Projects. The trip will be an experience long remembered.

Dr. Scranton opened the conference by speaking to the audience in Vietnamese. The six AOFAS members presented, as did four Vietnamese surgeons, and simultaneous translation allowed all to understand.

Dr. Sheskier, who previously participated in three medical mission projects in Vietnam with another organization, says, “Vietnam is a vibrant and growing country with many people. Surgeons there are anxious to learn more about treatment of foot and ankle disease.”

Speaking at the conference, Dr. Richardson, who was stationed in Thailand treating casualties arriving from the war in Vietnam, had traveled once to Vietnam during his tour of duty. He briefly summarized his clinical presentations and then told the audience he wanted to ‘speak from the heart’.

“I am speaking as one who has not been to Vietnam in a very long time, and this has been a very meaningful trip for me. The doctors here are good doctors. You are working with so much less than what we have, and you are doing good work for your people. You have welcomed us warmly into your hospitals and into your operating rooms. You have allowed us to operate on your people. We have worked side by side with you in treating your patients. The families have come a long way, with no material goods, and only the look of pain and hope in their eyes. We would take off the children’s clothes for examination, and the children had been meticulously cared for. We learned very quickly that the Vietnamese people are very strong, and yet very gentle – a rare combination. We brought you so little compared to what you have brought to us. We thank you very much.”

Team two carries on

Following the conference, Dr. Nyska and Dr. Romash, also first time volunteers for the AOFAS project, operated in Vinh City for several days. Joined by Dr. Shields, they then traveled north from Hanoi by overnight train to Lao Cai near the Chinese border. The Lao Cai provincial hospital, in the scenic mountainous area that is home to Vietnam’s ethnic minority tribes, is a new site this year for the AOFAS project. There too, the AOFAS members were warmly welcomed by their orthopaedic counterparts. Families and patients, some in the colorful traditional dress of their individual tribes, were waiting to be seen and anxious to have corrective surgery.

Why volunteer?

In addition to being presented with unusual and challenging cases, operating without access to the equipment they normally use in their own operating rooms was challenging for the surgeons. “MD” stands for “make do,” commented one trip participant. They acknowledged, however, that the challenges were part of what drew them to volunteer in the first place.

AOFAS members spent time at Viet Duc Hospital, the major teaching hospital in Hanoi, where they saw patients and operated with orthopaedic surgeons and their residents. Pictured at right is a 17-year-old patient born without knee joints. She is carried to school each day on her father’s back and is the top student in the class. Drs. Pierce Scranton and Naomi Shields plan to give her the gift of walking when they operate on her with surgeons at Viet Duc Hospital during a return trip to Vietnam next year.
MEMBERSHIP MATTERS
Is your membership category correct?

As you complete foot and ankle fellowship and enter practice or accept an academic position, be sure to stay in touch with the AOFAS so your membership category and related benefits will continue to grow with you as your career advances.

Active, Candidate, and International Members are included on the AOFAS online physician referral service, may serve on committees, and may be invited to participate on the faculty of a key educational program, and more.

The elevation process for current AOFAS members is outlined below. Please review your current membership category and if you think you should be elevated to a different level, please contact Lois Bierman, Membership & Marketing Manager, at LBierman@aofas.org or 847-384-4382.

Applications for elevation should be submitted by January 1, 2008 for consideration at Specialty Day 2008.

Elevation process – current AOFAS members

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<tr>
<th>Category elevation</th>
<th>Submission requirements</th>
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<tr>
<td>Resident to Fellow</td>
<td>Letter of request; updated CV</td>
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<tr>
<td>Resident or Fellow to Candidate</td>
<td>New application; letter of sponsorship from AOFAS Active or Emeritus Member; updated CV; payment of $50 application fee</td>
</tr>
<tr>
<td>Resident or Fellow to International</td>
<td>New application; letter of sponsorship from AOFAS Active or International Member; updated CV; payment of $50 application fee</td>
</tr>
<tr>
<td>Candidate to Active</td>
<td>Letter of request; updated CV</td>
</tr>
<tr>
<td>Candidate or Active to Military</td>
<td>Letter of request, updated CV; military ID/papers showing active duty status</td>
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The work of the Nominating Committee is underway

Six members were nominated at the AOFAS Business Meeting held February 17, 2007 during Specialty Day in San Diego to serve on the Nominating Committee. On April 16 all Active Members were notified via postal mail that voting to select three of the six would be online. The mailing included information on the voting process and a biographical profile on each of the six nominees. On April 27, an e-mail ballot was sent to all Active Members along with a link to the candidate profile information found on the Web site. The e-mail ballot enabled each member to “click and vote” at any time prior to the close of balloting on May 11. A total of 235 Active Members cast ballots.

Drs. John Early, Sheldon Lin, and Lowell Lutter (in alphabetical order) were elected by the membership to serve on the Nominating Committee.

In accord with the Bylaws, the Nominating Committee is chaired by the Immediate Past President, James Brodsky, MD. The committee includes the chair, the three members elected by the membership, and one member appointed by the current president. Dr. Lowell Gill has appointed John McDermott, MD to serve on this committee.

The Nominating Committee will prepare a slate for open officer and Board of Directors positions, which include President-elect, Vice President, Secretary, and two Member-at-Large positions. The Nominating Committee will present its slate to the membership during the Annual Business Meeting in Toronto. The meeting will be held at 1:05 pm on Saturday, July 14, 2007, in the Frontenac Ballroom of the Westin Harbour Castle in Toronto, Ontario, Canada, immediately following the close of the scientific session. All Active Members are encouraged to attend the meeting. Only Active Members have the right to vote, and voting must be in person.

Patient-education brochures

Initial sales of the newly-released brochures – The Diabetic Foot, The Adult Foot and Ten Points of Proper Shoe Fit – have surpassed target goals. Imprinted personalization information is a popular option and is available on all brochures. Sample packets with order forms will be distributed to all Active and Candidate Members at the Annual Summer Meeting in Toronto. To download a form from the AOFAS Web site, members need simply login and click on My AOFAS/Patient-Education Brochures. Questions? Please call the AOFAS office at 800-235-4855 or send an e-mail to aofasinfo@aofas.org.

Fellowship Match
continued from page 1

Positive feedback: the process worked

Feedback from fellowship directors, both those whose positions filled and those whose positions did not, was that the process worked well and it is important to continue to have an organized structured match process for foot and ankle fellowships.

The Board of Directors expressed strong support for continuing the match and congratulated Dr. Michael Aronow on the significant work that he has done to bring the match together.

“The AOFAS Board is committed to increasing visibility for foot and ankle throughout the orthopaedic community and to residents early in their training. The fellowship match program is a concrete step toward showing these young orthopaedists that we are organized, trustworthy, and have their best interests at heart,” says Steven Ross, MD, AOFAS president-elect.