

Protect Patients: Oppose HB 2817

Podiatrists do not complete medical school, and today's practicing podiatrists have received varying levels of training depending on when they completed their education.

HB 2817 dangerously expands the scope of practice for <u>all</u> podiatrists.





Current Podiatrist Scope

Proposed Podiatrist Scope

The soft tissue ailments which podiatrists would be permitted to treat under HB 2817 are often indicative of a systemic problem. Significant training is needed to identify the root illness. If the underlying issue is improperly treated, amputation or other serious complications can result.

Not all podiatrists are created equal

Podiatrists can play an important role in a care team, and many of our members work closely with podiatrists within their practices.

However, the statement that a podiatrist is "board certified" can have different meanings, depending on the point in time the podiatrist became board certified:

- Before 1996: No residency requirements to become board certified
- From 1996- 2005: **just one year residency requirement** to sit for the Foot Surgery or RRA Surgery oral certification exams
- From 2006-2013: 2 year residency requirement

Only 12% of current active American Board of Podiatric Surgery board certified diplomates are RRA certified

Podiatrists who wish to expand their scope as described in HB 2817 should be required to graduate from a three-year residency program in podiatric medicine and reconstructive rear foot and ankle (RRA) surgery accredited by the Council on Podiatric Medical Education. Additional clarification is needed to limit this bill to non-surgical procedures.

Without these additional protections, patients are at risk.

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