

February 20, 2013

From: Nina Babu, DPM, 86-1 Cosey Beach Avenue, East Haven, CT 06512

RE: HB 5443 - AN ACT REQUIRING PODIATRISTS TO BE BOARD QUALIFIED

To Whom It May Concern:

I appreciate this opportunity to provide the audience with my testimony regarding HB 5443. I take this honor and responsibility seriously and trust that my statement will provide the decision makers with useful input regarding HB 5443. I hope my statement serves to provide the perspective of the challenges faced by a recent graduate beginning a professional career in podiatric surgery in the State of Connecticut.

I am a board qualified Podiatric Foot and Ankle surgeon, and currently employed at Center for Orthopaedics (CFO), a private practice specializing in Orthopaedic and Podiatric care in the greater New Haven area. I have been practicing in this capacity since October 2010.

I am a graduate of the Temple University School of Podiatric Medicine and then trained for 3 years at Kaiser San Francisco Bay Area Foot & Ankle program. As part of my residency program I received training in extensive ankle trauma and reconstruction, including, but not limited to ankle ORIF, arthroscopy, total ankle replacements, ankle fusions, etc.

The excitement of starting my position at CFO, quickly turned to one of challenge, as I recognized that my ankle surgery privileges were limited, due to the current restrictive laws in the state of Connecticut for podiatric surgeons. I embarked on my professional career, after extensive training from one of the nation's top programs (and after having had the opportunity to train directly under Dr. Schuberth – a leading podiatric surgeon in the country). My residency logs will reflect almost 450 rearfoot/ankle cases. Despite the quality and extent of my training the requirement for board certification (per the current laws in CT) prevents me from performing ankle surgery on my own. In the current setting, as a board qualified surgeon, I must have a proctor in the OR, when I have to perform ankle surgery for any of my patients. This requirement adds a layer of logistical difficulty in scheduling and performing surgery, not to mention the resource and revenue implications this has on my colleagues in the practice. Therefore, allowing board qualified DPMs to undertake ankle surgery will alleviate this situation.

While recognizing the autonomy and independence across the various states with respect to such laws, I would like to point out that several states in our country do not place similar restrictions and that their laws allow board qualified DPMs to carry out ankle surgery independent of any proctoring.

The process for a board qualified DPM to attain board certification, involves completing a minimum number of cases (meeting certain pathologies). The current restrictive law makes it harder for a DPM, like myself, starting out in my professional career, to complete the necessary number of cases toward qualification for the board certification process. In the framework of the current laws, I have found myself not being able to practice the skills that I was trained in during my residency years – and thus fearing the loss of such skills due to not applying it on an immediate and regular basis.

The language in HB 5443 addresses this problem, by changing the requirement -- AN ACT REQUIRING PODIATRISTS TO BE BOARD QUALIFIED. I whole heartedly support this progressive change being contemplated by the Connecticut legislature. I commend the legislature for directly engaging in this very important step toward making a pragmatic change for DPMs. In my current role as the Residency Academic Coordinator at the Yale New Haven Hospital-VACT Healthcare System Podiatric Medicine and Surgery Residency Program, I have found myself in conversations with DPMs finishing up their residency – looking to leave the state of Connecticut, seeking employment in other states – that do not have the same restrictive laws as Connecticut.

In my professional opinion, it would be a shame for the state to lose these extremely well trained residents to other states, simply because of the restrictive laws. Actually, I have myself, considered positions in other states that allow ankle privileges for DPM's based on their training (i.e. board qualified) versus requiring board certification. HB 5443 addresses mitigating the catch-22 that DPMs find themselves in, in our state and I sincerely hope that our legislature can change this in the near future. I trust that this statement is helpful as the House debates bill HB 5443 and I am happy to make myself available for additional information and clarification.

Yours Sincerely,

Nina Babu, DPM