
OLR Bill Analysis

sHB 5196 (as amended by House "B")*

AN ACT EXPANDING THE PODIATRIC SCOPE OF PRACTICE.

SUMMARY

This bill expands the scope of practice of podiatric medicine to allow podiatrists to independently perform Chopart joint-level (i.e., forefoot and midfoot) amputations. To do so, a licensed podiatrist must provide the Department of Public Health (DPH) documentation that they:

1. graduated from a podiatric residency program meeting specified criteria and
2. hold current board certification or qualification in reconstructive rearfoot ankle surgery by the American Board of Foot and Ankle Surgery, or its successor.

Under the bill, the residency program must have been accredited by the Council on Podiatric Medical Education, or its successor, when the podiatrist graduated. The program must have been at least (1) two years in length if the person graduated before June 1, 2006, or (2) three years for graduates on or after that date.

Current law already allows podiatrists who meet the above criteria to independently perform certain ankle surgeries, including all soft tissue and osseous procedures (e.g., fixing ankle fractures, ankle fusions, and ankle arthroscopy). They cannot perform total ankle replacements (see below), tibial pilon fracture surgeries, or surgeries to treat complications within the tibial diaphysis related to the use of external fixation pins.

The bill also requires the Public Health Committee co-chairpersons to convene a panel of two representatives each from an organization representing podiatrists and an organization representing orthopedic physicians in Connecticut. The panel must develop a protocol by August 1, 2024, for allowing podiatrists who meet the criteria described

above to perform total ankle replacement surgeries.

Under the bill, the protocol must describe the experience, skill, and training requirements to perform these surgeries and the procedure for assessing whether a podiatrist meets the requirements. The panel must report on the protocol to the Public Health Committee and the DPH commissioner by September 1, 2024. The commissioner must then post the protocol on the department’s website by October 1, 2024.

Starting October 1, 2024, the bill allows podiatrists who provide DPH documentation that they meet the protocol’s requirements to apply to a Connecticut hospital for privileges to perform total ankle replacement surgeries. At a minimum, hospitals may use the protocol to determine whether podiatrists meet the requirements needed to perform the surgeries.

Under the bill, hospitals are not required to grant podiatrists privileges to perform total ankle replacement surgeries, but podiatrists who receive the privileges may do so.

*House Amendment “B” replaces the underlying bill (File 96) and (1) specifies that podiatrists who meet certain criteria may perform Chopart joint-level amputations and (2) adds the provision creating a process for certain podiatrists to perform total ankle replacement surgeries.

EFFECTIVE DATE: October 1, 2024, except the provision on total ankle replacement surgeries is effective upon passage.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 36 Nay 1 (03/11/2024)