

## The Class of 2013

When the confetti has been swept up and the framed diplomas were hung on their walls, the graduating Class of 2013 marched boldly on to new endeavors. Several of our 2013 graduates recently shared their experiences on the road to professional practice with us.

## Dean's Message

### Faith Made Them Champions

The students from our inaugural class, DPM 2013, have successfully completed their seven year journey to become practicing physicians and surgeons of the foot and ankle. Congratulations - you have fulfilled the mission of CPM.

*"Academic excellence achieved through an Innovative curriculum, interprofessional education and research that trains students to integrate into the health care system as compassionate specialists for patients with lower extremity conditions."* - WesternU CPM Mission Statement

Most of you have entered practice, however several have entered fellowships to further advance their knowledge and skills and are highlighted in this issue. We are proud of you *all*.

The admission letters you received in 2009 symbolized expectant faith. The future loomed mysteriously before you beyond the limits of your understanding. However you exemplified ruthless trust and fearless obedience in CPM's administration, faculty and staff. Monthly Dean's town hall and mentoring sessions with faculty provided the platform to inform and inspire giving insight and perspective all critical for growth and development.

How do you frame your expectations for the future? Will your current health finances and relationships dictate your prospects? God knows and controls what we do not know and cannot control. His purposeful power over the present and future gives his people hope. Hope is the anchor.

The seeds of hope have been planted in you as the future and next generation of leaders in Podiatric Academic Medicine. Through this investment we will harvest chancellors, deans, professors and residency program directors to provide teaching, research and patient care to vulnerable populations, promoting health equity to our communities.



**Lawrence B. Harkless, DPM**  
**Founding Dean, Professor**  
 Dept. of Podiatric Medicine,  
 Surgery & Biomechanics  
 College of Podiatric Medicine

## Issue Highlights

- **Biomechanics**
- **CPM's Satterfield's "School Days"**
- **2016 Spaghetтини Fundraiser**
- **Student Research**
- **Student Profile: Sarah Yancovitz**
- **Reina Deogracias: CPM Clinician**
- **CPM Hero—Shahadad Saedi**



## Brett Waverly

### Fellowship applied for and why?

“Weil Foot & Ankle Institute” in Des Plaines, Illinois. I applied because of their reputation in advance foot and ankle reconstruction and research. The Weil Foot & Ankle Institute provides a high-level fellowship experience working with nationally and internationally known practitioners who are involved in all aspects of the profession. The fellowship focuses on reconstruction of forefoot, rearfoot and ankle, as well as research practice management, orthobiologics and alternatives in treatments for all foot and ankles pathologies.”

### Describe the application process.

“All ACFAS approved fellowships utilize a universal application. Each fellowship program interview is unique.”

### How long is the Fellowship program?

“12 months.”

### What sub-specialty have you focused on and why?

“Advanced foot and ankle reconstruction.”

### Any comments regarding your Fellowship time, and plans for the future?

“Fellowship training is not the standard in our profession. It is not for everyone, and should not be taken lightly. Each program offers a distinct experience, and it should be treated as advanced training in a specific area of interest to compliment residency training. A fellowship will not make up for a poor residency training. The utmost goal of postgraduate study is to obtain a strong residency program, and pursue a fellowship as further education in a more focused environment, if desired. Any residents or students may feel free to contact me via email if they are interested in a fellowship or have any questions regarding life after podiatry school.”

## Giving to the College of Podiatric Medicine

### *Your Financial Support is Vital!*

Western University of Health Sciences, College of Podiatric Medicine is an institution of exceptional quality that each year attracts the best and brightest students. Here they embark upon the journey of a lifetime. They come to pursue their dreams -- to learn the art of healing, to advance human knowledge, to transform their own lives, and the lives of others. They illuminate the past, shape the present, and will discover the future. They represent yesterday's dreams and the fulfillment of tomorrow's hope. They give life to big ideas. They will leave the world a better place. They are our future. To make your donation, please contact Amanda Behnke at (909) 234-5705 or [abehnke@westernu.edu](mailto:abehnke@westernu.edu) and give to the College of Podiatric Medicine.

*We appreciate your support of the College and the profession!*

# SPAGHETTINI FUNDRAISER

You put together a great band, world-class food and drink, a hot venue and people who care about the profession of podiatric medicine, and you would have the October 23rd Third Annual Spaghettini Fundraiser. Mark Felton and his band rocked the house, and the guests enjoyed the jazz ambiance along with crab cakes, shrimp, a selection of pastas, bruschetta, salads, artisan breads and lots of delectable desserts.

The Silent Auction and ticket sales brought in \$15,438 for the College of Podiatric Medicine. Dean Harkless and the College of Podiatric Medicine thank everyone who attended and contributed.







# Trevor E. Black

## Fellowship applied for and why?

“The Southeast Permanente Foot and Ankle Trauma and Reconstructive Surgical Fellowship in Atlanta, Georgia. The Fellowship is 1-year long. I chose it because I was looking for an opportunity to enhance my residency education. My residency was heavily reconstructive. Although we had a substantial amount of trauma experience, I felt that the area I most wanted to be supplemented in regard to my surgical skill was in the realm of advanced foot and ankle trauma.”

## How was the application process?

“The fellowship process started mid-way through the second year of residency. I visited multiple fellowships, often twice. After I narrowed down the programs to the ones I felt were the best fit for me, I submitted the applications which are all similar from program to program. These included letters of recommendations, diploma from podiatry school, etc. The application process was very straight forward. Then there was a formal interview.”

## What sub-specialty have you focused on and why?

“I have focused on trauma and reconstruction based on my interest in the field of foot and ankle surgery. I felt that I excelled in reconstruction and trauma during residency, and wanted to refine my surgical skills within that area of foot and ankle surgery.”

## What are some of the highs and lows of the program in your experience?

“The high in my program is volume. I will do approximately 1,100 cases this year with extreme diversity. I will do everything from hammertoes and bunions to total ankle replacements, distal met fractures to pilons. The diversity here is great! However, in order to achieve that kind of surgical experience requires a substantial amount of work, and I will work most weekends this year, being constantly on call.”

## Do you have any comments regarding your Fellowship time and plans for the future?

“I view my year of Fellowship as another academic step in my road to a surgical career. The responsibility of being a physician is great, and the more training I receive to provide my patients with the best care possible is worth my time and effort. In addition to advanced surgical training, I also plan to develop and initiate various studies that I hope will produce publishable data.”

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In collaboration with the LA County + USC Medical Center Foundation, CPM received a \$50,000 grant to develop the implementation plan for a Limb Preservation Center at the Los Angeles County Department of Health Services Edward R. Roybal Health Center. The plan addresses the implementation and sustainable operations of a leading Limb Preservation Center to prevent the excessive and costly lower extremity amputations that plague the vulnerable populations in the communities around the Roybal Center. This project is funded in part by L.A. Care Health Plan to improve community and public health in Los Angeles County.

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# 2017 SCHOLARSHIP OPPORTUNITIES

## **BAKO Pathology Service Scholarship**

Student who, in the spirit of BAKO, has set themselves apart working to advance, not only their own career, but also the Podiatric profession.

## **CPMA Scholarship**

Must be a 3rd or 4th year student, has attended two local CPMA meetings. Student has to have earned grades of 90% or higher in clinical rotations.

## **Dean's Leadership & Service Award**

In appreciation of service to the college, community, leadership ability and academic excellence.

## **Dean's Scholarship Award**

In appreciation of service to the college and academic excellence.

## **Dean's Vision Award**

Student who strives to achieve the most comprehensive education for him or herself, inside and outside of the classroom, going beyond what is presented by the faculty.

## **Gary P. Jolly Lifelong Learner Award**

Student who embodies Dr. Jolly's appreciation for lifelong learning and the rewards they will reap through the satisfaction of a job well done.

## **Levi Family Scholarship**

Must be a 1st year student. Hard-working student with a GPA between 3.2 to 3.59.

## **Louis T. Bogy Award**

Student who exemplifies the political acumen and vision of the legendary Texan, Louis T. Bogy.

## **Michael L. Stone, DPM Outstanding Professional Conduct Award**

- 4th year student
- Grades (must have maintained a 3.0 GPA)
- Service to College & Community
- Focused interest in foot & ankle surgery
- Excellence in all endeavors
- Demonstrated outstanding professional conduct through college

## **Podiatric Insurance Company of America Recipients Scholarships**

- 4th year student in good standing
- A student who has demonstrated interest in amputation prevention in Diabetes and Wound Care evidenced by scholarship, leadership and service
- A student who has demonstrated exceptional clinical skills

## **President's Society Award**

In recognition of academic excellence and service to the university.



# Adrienne Estes

## Fellowship applied for and why?

“The North Jersey Foot & Ankle Reconstructive Fellowship in Lyndhurst, New Jersey. I wanted to seek advancement in limb salvage and reconstructive surgery. The Director was Top Doctor in 2015 and 2016, and the current residency director has a focus on education and surgical skills. I felt this training would provide an advantage toward higher caliber employment, and polish my existing technical skills. Increasing critical thinking and learning patient management were also a consideration in applying for the fellowship. The fellowship is 1-year long.”

## How was the application process?

“At that time it was an individualized application (per fellowship) process, but that has changed with the universal application process starting in 2017. After submitting my CV and Letter of Intent, there were phone and Skype interviews, followed by in-person social interviews.”

## What sub-specialty have you focused on and why?

“I focused on limb salvage because it’s an individualized approach for patient care which requires a higher level of skills to accommodate patient’s comorbidities, active pathology and treatment modalities.”

## What are some of the highs and lows of the program in your experience?

“This is the second year this fellowship has been open...so able to modify the program to make it better. Goal will be to create stable attending relationships with goal of 500 cases per year. My year will likely produce 300 rearfoot cases. Highs are advanced reconstructive surgery, only rearfoot with director. Opportunities to work with other attendings to include forefoot, trauma, sports medicine. Work with St. Mary’s residents. I’m credentialed at three hospitals, and two surgical centers. I work in a wound clinic once a week, and a private practice clinic three times per week. The surgery clinic takes priority over the other clinics. The Director is flexible and accommodates my educational time requirements. I get to attend seminars/conferences/ workshops with a \$1,500 stipend. The Fellow surgical clinic is scheduled to begin in December, 2016 to aid in ABFAS board certification.

Lows would being a resident at two of the three hospitals so it requires daily rounding if patients are in house. Subacute facility consults are to be done, as needed. I only get one week of vacation per year.”

## Do you have any comments regarding your Fellowship time and plans for the future?

“My goal is to relocated back out West in a multi-specialty or group practice or hospital.”

### Summer 2017 Special Healthcare Careers Program

Eight WesternU Colleges, including the College of Podiatric Medicine, will host 80 underrepresented minority college students for six-weeks next summer, exposing them to the various healthcare careers. It is partially funded by a \$400,000+ grant from Robert Wood Johnson Foundation. During the podiatry encounter students will learn about biomechanics, cast each other for orthotics and perform surgery on sawbones.



# Dean, Lawrence B. Harkless Endowed Lecture

*Inspiring the Next Generation of Leaders in Health Care*



Michael V. Drake

Please join us for the second annual  
Dean's Distinguished Lecture

## “Higher Education, Healthcare and The Future of America”

Thursday, March 30, 2017 at 5:30pm  
Western University of Health Sciences campus  
Health Education Center  
Lecture Hall 1

Dr. Michael V. Drake is the 15th president of The Ohio State University.

His vision for the university's future focuses on access, affordability and excellence—with an emphasis on groundbreaking research and modern and effective teaching. Other focus areas include deepening the university's community engagement and advancing inclusive excellence and diversity.

He has been a leader in higher education for nearly four decades, serving as chancellor of the University of California, Irvine, for nine years prior to his arrival at Ohio State. During his tenure, Dr. Drake made significant progress that resulted in Irvine being recognized as a national leader in increasing minority enrollment and sustainability. In 2014, UC Irvine ranked No. 1 nationally on Sierra Magazine's list of the “Ten Coolest Schools” for improving energy efficiency and sustainability.

Dr. Drake is a member of the National Academy of Medicine and the American Academy of Arts & Sciences. He has been named vice chair of the Association of American Universities for 2016-17 and will serve as chair for 2017-18. He currently serves on the AAU Membership Committee and is completing a three-year term on the board of directors. He also serves in leadership roles for the University Innovation Alliance, National Collegiate Athletic Association and B1G 10 and as chair of the Council of Presidents of the Association of Public and Land-grant Universities. In 2015, he was appointed to the board of the Rock and Roll Hall of Fame.



Western  
University  
OF HEALTH SCIENCES

College of  
Podiatric Medicine

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Pomona, California 91766

[www.westernu.edu](http://www.westernu.edu)

# 2016/2017 CPM Student Research

**Trent Brookshier  
Timothy Brookes**



*"The combined effects of social history, culture, and support in diabetic foot care management among Latinos"*

**Rohan Thanby  
Richard Naverrete, Jr.**



*"Efficacy and Safety of iniconazole 10% Solution in the Treatment of Onychomycosis in Diabetic Patients"*

**Jeffrey Sanker  
Quinton Wong**



*"A Clinical Investigation of the Safety and Efficacy of Treating Charcot Neuroarthropathy with Denosumab"*

**Trevor Takeyama  
Kyle Yi**



*"Developing a Charcot Foot Radiograph Repository"*  
Presented at the 2016 STARS Symposium

**Howard Chang  
Pedro Esquivel**



*"The Impact of the Social Determinants of Health on Diabetes Related Lower Extremity Amputations"*  
Presented at the 2016 STARS Symposium

**Sara Yancovitz  
Thomas Owalabi**



*"Wound Care Specialists: An investigation and comparison of wound care training for Physical Therapists and Podiatrists."*

**Dana Brems  
Marcela Orellana**



*"The Use of Ad-Hoc Spanish Medical Interpreters for Care of the Diabetic Foot "*  
Presented at the 2016 STARS Symposium

**Zachary Gusten with  
Dr. Jonathan Labovitz**



*"The impact of the healthcare facility on cost and utilization in diabetic foot complications"*  
Presented at the Diabetic Limb Salvage Meeting, Georgetown University, Washington, DC, 2016

**Meghan Blanchet  
Stephanie Campbell**



*"Transmetatarsal Amputation Review: A Biomechanical Analysis"*  
Poster to be presented ACFAS, February 2017, in Las Vegas, NV with Dr. Rebecca Moellmer





# Joshua C. Hunt

## **Fellowship applied for and why?**

“Coachella Valley Foot and Ankle Institute in Rancho Mirage, CA. The #1 reason I chose this fellowship was the vision that the director has for not only his practice but also the profession. He approaches every case with sound logic. He will only choose a treatment if it makes sense for the patient and not because he's comfortable with the procedure. Dr. Wehrli is ingenuitive and is always thinking outside the box. I hope to be able to open my mind the way he does by the end of my 12 month under his training.”

## **Describe the application process.**

“I sent in the requested documents. Flew out for a site visit and had a group interview with the attendings and current fellow. I was notified within a few weeks that they were offering me a spot at the program. Very easy process.”

## **How long is the Fellowship program?**

“12 months.”

## **What sub-specialty have you focused on and why?**

“Trauma and Reconstruction. Over the years I have come to enjoy the art of reconstructive surgery. There is no cut-and-paste way to treat each patient. Every case requires diligent planning and adaptability intraoperatively. As a surgeon you get help those people that are usually at the end of the road of their treatment and many patients are coming to you for a second opinion to avoid a below knee amputation.”

## **What are some of the highs and lows of the program in your experience?**

“The highs and lows are similar to those of residency. The difficulty comes at the beginning with a steep learning curve in your new job responsibilities and getting used to new hospitals.

I have really enjoyed the continuity of care that I have been able to provide to my patients during the fellowship versus my residency. I have been able to grow my perioperative judgement as well as hone my surgical skills all under the outstanding direction of my fellowship director. He is truly the mentor that I have been looking for in this profession.”

## **Any comments regarding your Fellowship time, and plans for the future?**

“I would like to take my advanced training and use it as a platform to train the future generations in this profession. I want to work in a teaching setting at the resident/fellow training level. I have aspirations to start a residency or fellowship in the future. This profession is moving forward quickly and I want to be at the leading edge.”



# Craig Udall

## Fellowship applied for and why?

"The Pediatric and Adult Foot and Ankle Surgery Fellowship in Atlanta, Georgia. I wanted to further enhance my surgical skills and decision-making abilities as well as increase my job opportunities. My director is a great mentor, and has a great reputation and is well-connected."

## Describe the application process.

"The application is found on the ACFAS Fellowship website, and there is some paperwork involved, just like when applying to a residency. Then you have to go visit and interview there."

## How long is the Fellowship program?

"One year."

## What sub-specialty have you focused on and why?


"Adult and pediatric reconstructive surgery. There is professional satisfaction with correcting true deformity that has caused people pain and loss of a normal limb for some time. It is so great when patients are grateful and appreciative of your work."

## What are some of the highs and lows of the program in your experience?

"It is a lot of work, especially learning the day-to-day business side of running a successful podiatry program and coding, etc. I find that during fellowship it is much easier to focus on small details or notice pearls and techniques that were hard to see during residency."

## Any comments regarding your Fellowship time and plans for the future?


"I feel like fellowship is the next big thing in the podiatry world. It is valuable time spent and worth every minute! I am in the job search process right now, and hope to head back out West to practice."



AT ONE POINT IN YOUR LIFE YOUR FEET DIDN'T HURT  
**THEN YOU STOOD UP**

— If your feet hurt, see a Western University Podiatrist —

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DOCTORS WHO CARE ABOUT YOU

 **Foot & Ankle Center**

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Pomona, CA 91766  
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[www.westernupcc.com/foot\\_ankle.html](http://www.westernupcc.com/foot_ankle.html)

**For more information, please visit  
[westernu.edu/podiatry](http://westernu.edu/podiatry) or call (909) 706-3933**

**For our Foot & Ankle Center, please WALK in  
or call (909) 706-3877**

**Western University of Health Sciences,  
309 E. Second Street, Pomona, CA 91766**

# WesternU College of Podiatric Medicine Signs Contract with Riverside University Health System

After years of providing care to low-income and indigent patients at the Riverside University Medical Center (formerly Riverside County Regional Medical Center), CPM has agreed to terms with Riverside County to begin a full-time podiatric service at the Medical Center. This includes inpatient and ambulatory care for patients with health disparities who often lack access to podiatric care they so often need. The population health efforts of the Medical Center will give CPM the opportunity to treat patients at the Medical Center and within the surrounding communities, including at Federally Qualified Health Centers within the region, thus enhancing exposure to a wide variety of pathology for CPM students. There is already significant interest in developing a new competency based podiatric residency program and the relationship provides CPM with additional funding to expand the faculty.



At the intersection of where academic excellence, interprofessional education and innovative curriculum meet, to train the podiatric physicians and surgeons of tomorrow. WesternU's College of Podiatric Medicine and the Foot & Ankle Center are committed to serving the community through education and quality Podiatric Medical care! There's a growing need for Podiatric Physicians to serve a population that is aging and often suffers from diabetes and arthritis in order to keep California and America walking!



# STUDENT PROFILE:

## Sara Yancovitz, DPM 2019

A little backstory on myself. I've always been a competitive athletic growing up. I grew up playing tennis, and went on to play varsity tennis and basketball in high school. I went on to college expecting play basketball for a D3 school, but I ended up doing pre-med, and so it left me no time for that. I always felt like I was missing something in terms of athleticism, and my dad suggested that I try a triathlon.

That was the kind of sport where I could train on my own time rather than on someone else's schedule, so it actually worked really well for me. So I started getting into triathlons, and I turned out to be pretty good at them. When I got onto the bike at a New York (I'm from NY) triathlon, my time turned out to be comparable to the pros. People started paying attention to me, said I had "natural talent" and began encouraging me to get into bike racing.



At first I was intimidated because the riders are so close to each other. Practicing my skills helped me overcome that, and I was doing pretty well in my first races. I rose in the ranks fairly quickly, getting a professional contract with a NYC team sponsored by Stan's No Tubes within the first year. I just stopped doing triathlons to focus on bike racing. They were in the business of developing riders, so they picked me up in 2014 and brought me through the ranks, and soon I was travelling all over. It was great. I rode with them a second year, had an excellent season and also got accepted to WesternU, so it was a really great year!

I was one of the top U25 riders in the country in 2015, according to USA Cycling. I had a really bad accident before I came to WesternU where I literally broke my face. It happened during a bike race when I was serving as a sprinter, and the girl in front of me in the final sprint



went down, and I hit her and flipped over my handlebars, landing face-first on the asphalt. I broke my jaw and was wired shut for five weeks. It was pretty demoralizing. After I had the wires removed, I came right to WesternU. It was like a time warp. Pro cyclist to the being physically disabled to a full-time podiatry student.

A team out of Los Angeles, LA Sweat, was familiar with me from bike races around the country, and they offered me a contract. I told them I couldn't race during school, but we made an arrangement to race during the summer months. This was a very unique opportunity – and what a blast! I travelled to Santa Fe, Tulsa, Milwaukee, New York, Boise, Boulder, Chicago, Houston – all before the start of my second year of medical school. A noteworthy race this summer was in Boise where I competed alongside Kristin Armstrong before she gold medaled at the 2016 Rio Olympics.



It was difficult starting the demanding curriculum at school and keeping up with training. I started riding indoor while watching Echo with headphones and on an indoor trainer. This was during MCBM time, so if you look at our schedule you can see that 8-4 every day is filled with lectures. As the semester went on and the work load was more conceptual, it was conducive to my training schedule. It was really extreme time management, and I pretty much had to give up a social life. With what little time I had with people I tried to maximize the social aspect as I have no family around here. But I was really psyched about my new contract, so it helped me to persevere..

Seeing the end goal, seeing where I wanted to be, helped me through. School is really hard, professional bike racing is extremely hard. It looks great from the outside; all this fancy expensive high-end gear and equipment, and I get to travel all over the place, but you have to put in a lot of work for that. I work very hard to make both ends meet. Ultimately, for both cycling and school, if you want to succeed, you have to put in the time and staying focused on the "Big Picture".

# Reina Deogracias

*Dr. Reina Deogracias is an alumni of Western University's College of Podiatric Medicine, inaugural class. She underwent a three-year foot and ankle surgical residency at the VA Palo Alto—A Stanford Teaching Affiliate hospital. As a fully licensed and board qualified foot and ankle surgeon, Dr. Deogracias' clinical practice encompasses a full panel of services, particularly diabetic wound care and limb salvage. During her residency training she was selected amongst chief residents nationally to participate in a year-long clinical research using human placental tissue products for chronic wound care.*

*Dr. Deogracias is committed to improving patient outcomes, and has a personal interest in forming a partnership with her patients. Personally, she enjoys her early morning runs and empowers her patients to pursue an equally active lifestyle.*



My journey started off in the beautiful college town of Goleta, California where I attended the University of California, Santa Barbara, and graduated with a Bachelor of Science degree in Cell and Developmental Biology. Yes, Santa Barbara may in fact be the happiest place on Earth! There my love of science and running became paramount and directed my career interests.

One of my biggest mentoring moments came from my orthopedic surgeon (I needed ACL recon surgery at 14). He recommended I look into Podiatry as it offered multiple avenues in which to practice, from surgery to sports medicine while offering a lack of the ortho's call schedule. I did some investigation and started to work as a medical assistant at Dr. Doug Richie's office in Seal Beach. I was sold! He was a sports med guru! I wanted to be just like him! There and then, I began the long journal of the MCAT, podiatry school, residency and now, finally, practice.

Being part of Western University's inaugural class was truly such an experience. We all worked together to make it happen, and it did! It was the ultimate showing of dedication, team work, respect and, without a doubt, love. The culture carried on with me to my residency at the VA Palo Alto where I became one of four residents accepted that year (2 of which were Western grads). Teamwork and commitment to each and every individual part of the team was key to my success in residency. Being gracious and respectful along the way turns a good practitioner into a stand out.

The advice I would give to a first-year student is take every day in stride. This is a total marathon. Don't run on all four cylinders all the time. If you find that you need to do so, ask around, make friends and learn to work smarter not harder. I know that's easier said than done. Understand your weaknesses and seek people who are willing to help you conquer them. Everyone needs a mentor and everyone needs a friend. A good system of checks and balances regarding criticism and validation will give you the skill set and confidence you need to shine. And always remember who got you there and where you came from. Be a responsible physician and respect your mentors and peers.



A \$10,000 grant was awarded to WesternU CPM by the  
Ohio College of Podiatric Medicine Foundation (OCPMF) in November this year.  
Thank you for your generosity and support of WesternU College of Podiatric Medicine!



# By Kathleen Satterfield, DPM, Assistant Dean

When I see how far we have come as podiatrists in the 30 years since I entered school, I am grateful for the actions of the DPMs who came before me.

During my fourth-year of podiatric medical school, we were required to do several months of private practice. I was in the office of a prominent New York podiatrist who practiced north of NYC. He was well respected, and well compensated for his hospital based, multi-year surgical training, which was not common at the time. On this particular snowy January day, he told me we would be visiting another doctor's office where he would be leading him through a neuroma surgery, taking his preceptee with him.

The preceptee, recently graduated, had not received a residency program and so, to learn the necessary skills to be able to practice effectively, he joined the older doctor's practice for a year. In return for the training, he would work for the other for free, effectively doing everything the other man did not wish to do – including a 60+ patient nail debridement clinic at the state mental hospital to shoveling the snow from the doctor's office sidewalk and driveway. I felt both grateful and a bit guilty that I knew already that I had a two-year surgical residency program waiting for me that summer.

We talk of residency shortages now but out of my class of 75, only three of us received multi-year surgical residency programs. It was not an unusual circumstance. Graduates were desperate enough to take unpaid preceptorships to learn skills that would help them to earn more in their practices. It was stories like the one I relate that spurred the profession to create programs, meaningful ones, to train everyone who wants training.

That afternoon we traveled the 25 miles to another upstate town to meet the podiatrist who had asked for help performing a surgery. You could tell it was a big deal to him. His office was typical in that area and not like the senior doctor's office in a medical building that he owned. Housed in an aging home, his treatment rooms had once been a living room and dining room. Although partitions had created isolated treatment areas, it still looked and felt like a 1930's Victorian living room. His medical assistant/ receptionist/billing clerk, also known as his wife, treated us like we were visiting dignitaries. The senior doctor asked me to set up the sterile field and to create a back table out of the top of a chest of drawers.

I will never forget how excited the doctor was when his "trainer" handed him the blade and instructed him where to cut, how deep to make the incision and how to spread the tissues apart. "There it is," he said. "There it is! See the white," meaning the color of the nerve. He dove the blade deep to cut the structure as the senior doctor said "Stop. Stop," and again "Stop!" when the man kept sawing at "the white."

He called me closer and pointed at the structure, which was close to the dorsum of the foot, nowhere near the level where the neuroma would be. "What is that, Kathy?" I did not want to embarrass the other man. He was so excited to be "performing" surgery but it was obvious that this was the shaft of the metatarsal. I told him in a low voice.

The "surgeon" was nonplussed. "So that's why it was so hard," he said and started to again dig into the wound with the point of the 15-blade. When the procedure ended, about 45 minutes later for what should have taken at most 15, the surgical wound looked like a traumatic injury, which by then it was. An extensor tendon had been severed and sutured. There was a large blob of soft tissue on the "back table." I could see fat, blood vessels, some tendon fibers but no observable nerve. "What you have performed there "Is a fine space-ectomy," the senior surgeon said.

On the drive back to his office, he talked about how the patient would do just fine. Sometimes you just need to clean out the intermetatarsal space that is "crowding" the nerves. He assured me I would see that done many times during my training although I never did. He also talked about how the man would get better with more training, which they arranged before he left the office. When we got back to the office he reminded the preceptee that he needed to get to the office early that next morning because they were expecting a big snow storm that night. He added, "Why don't you swing by the house and get my walk in the morning before you get to the office." It wasn't a question. It was expected.



*cont. on page 15*



I tell this story for a reason. There was a time, only 25 years ago, where there was very little opportunity to learn to be a podiatric surgeon. People were so desperate for the training that they would host visiting doctors to take them through a case in their offices and even work for free in a “preceptorship.” These were common practices. And yes, even shovel snow off another man’s sidewalk.

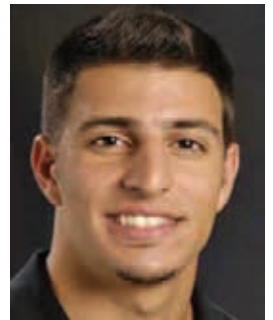
We have come so far. Our graduates join residency programs in major hospitals around the country, including those of the Ivy Leagues, where they can hold their own with their DO and MD counterparts on rotations. After three years of medical and surgical training, many will join multi-disciplinary practices and even open private practices. I am grateful for all that came before them and before me. Podiatrists were willing to do whatever it took to get training – some good, some terrible. They pushed the limits and earned the privilege to write prescriptions, to join and even lead a hospital staff, to perform histories and physicals, to perform hospital-based surgery. It is safe to say that the only limitation they have now is any limitation they put on themselves.

The next time you meet an older podiatrist, say “Thank you.” No doubt that person did something in his or her career to help you be able to walk into a hospital and be called “Doctor.”

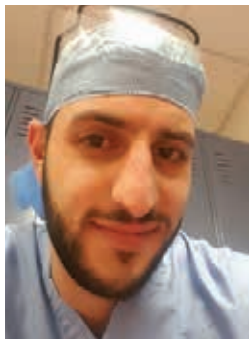
## WesternU CPM Graduate Saves Patient at the MedStar Washington Hospital Center

One of our PGY1 residents, Shahdad Saeedi, DPM, was rounding with the Podiatric Medicine team to check on foot and ankle patients. At one point during rounds he had to run to 2C (another unit) for some dressing supplies. During that trip down the hallway, he was urgently asked by a nurse to assist with a patient that was suddenly unresponsive. Shahdad stepped in without hesitation, and ran the code with the nurses. Using ACLS skills including chest compressions and administration of epinephrine, they were able to take the patient from asystole to a normal sinus rhythm. Shahdad was the only physician present for approximately 3 minutes, when the rapid response team arrived and took over. This is a tribute to the resident and also to the training system we have in place. He had received ACLS as part of orientation and, just one week before this incident, our program made one of our regular visits to the MedStar SiTEL Lab that included a station to refresh on ACLS!

John Steinberg, DPM, FACFAS, says, “I am regularly proud of the great work that our Podiatric Surgical Residents do, both on our service and throughout the hospital. This story is a real highlight in my book...the system did its job in preparing Shahdad and he had the leadership and character to step in when others may have been unsure because training may not have been up-to-date. Chalk one victory up for good preparedness and a great resident!” - John S. Steinberg, DPM FACFAS, Chief, Podiatric Surgery, MedStar Washington Hospital Center and MedStar Georgetown University Hospital.



Shahdad reached out to our faculty to share his experience and to give credit to the exceptional training he received at WesternU CPM:



Hello Dr. Satterfield,

I am now realizing the true value of my education I received at Western. It made for a smooth transition into residency. Thank you for all that you did for my colleagues and I throughout our years there.

I hope you are doing well and look forward to seeing you next time I am back on campus.

Best,

Shahdad

### CPME Certificate of Accreditation

Western U College of Podiatric Medicine received a full 8-year accreditation from the College of Podiatric Medicine Education (CPME) on April 30, 2016.

**Congratulations to our College faculty and staff for this achievement!**

PLACE  
STAMP  
HERE

## IMPORTANT DATES 2017

**January 2 –  
Classes Resume**

**January 16 –  
Martin Luther King Jr. Day (University Closed)**

**February 20 –  
President's Day (University Closed)**

**March 11 –  
Preview Day**

**March 15 –  
Honors Day**

**March 20-24 –  
Spring Break**

**May 16-19 –  
WesternU Commencement Ceremonies**

**May 29 –  
Memorial Day**

**June 17 –  
Preview Day**



It is with great pleasure that I introduce a new faculty member, Dr. Arnold S. Ross, who will be joining WesternU CPM faculty to provide educational enrichment to students in the area of Podiatric Biomechanics. Dr. Ross is a graduate of the University of California Los Angeles where he completed his undergraduate education in preparation for podiatric medical school. He's graduate of the California College of Podiatric Medicine in San Francisco, CA, (now known as the School of Podiatric Medicine at Samuel Merritt University in Oakland California); completed a Podiatric Medicine and Surgery residency and Fellowship in Podiatric Biomechanics. Upon completing his residency

and fellowship training, Dr. Ross served for a brief time as an Assistant Professor in the Department of Biomechanics at the California College of Podiatric Medicine. He returning to his home in Los Angeles, California where has been in clinical practice for well over 30 years. He is happily married with three children and all married with families of their own. Through his private office Dr. Ross has maintained a Mechanical Orthopedics Laboratory in which many students throughout the years have benefited from is expertise as externs on clerkship, enjoying an opportunity to learn and understand the connection between various orthotic applications to modern clinical practice in podiatric medicine. The College of Podiatric Medicine at Western University of Health Sciences is fortunate to have Dr. Ross as a member of it growing team of podiatric health care educators to mentor our students as they pursue their educational growth and development in preparation for graduate medical education and residency training opportunities. Please join our faculty as we welcome Dr. Ross to WesternU CPM.

Lester J. Jones, DPM, ME Ed  
Executive Associate Dean  
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