

**2022 PodPhy Written Testimony Adam Lowy senate.pdf**

Uploaded by: Adam Lowy

Position: FAV

# FAMILY FOOT & ANKLE

ASSOCIATES OF MARYLAND

MICHAEL J. FRANK, D.P.M.  
MARC E. GOLDBERG, D.P.M.  
ADAM B. LOWY, D.P.M.  
SCOTT W. NUTTER, D.P.M.

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February 7, 2022

Senator Paul G. Pinsky  
Chair, Education, Health, and Environmental Affairs Committee  
2 West Miller Senate Office Building  
11 Bladen Street  
Annapolis, MD 21401

Re: SB 0311 Podiatric Physician

Position: Support

Dear Chair Pinsky and Senators of the Committee,

This is my written support in the passing of SB0311 bill which will change the title within the State of Maryland of a Podiatrist to a Podiatric Physician.

My name is Adam Lowy and am currently the President-Elect of the Maryland Podiatric Medical Association. I'm a lifelong Baltimorean living in Howard County and in private practice in Montgomery & Prince George's county.

Currently across the country, 36 other states recognize Doctors of Podiatric Medicine (D.P.M.) with the term "Physicians" within their title. Some of these titles are Podiatric Medicine, Physicians who Practice Podiatric Medicine, Physician of the Foot & Ankle or Physician of the Foot and Leg.

A name change to Podiatric Physician is a true representation of that vast scope of knowledge and training that which deserves of including the name physician in our title. The name change is also a better reflection of our broad acceptance in the medical community. D.P.M.s hold executive positions among hospital boards, chair committees, as well as Chiefs of surgery. Our profession has worked very hard to educate the community, medical and abroad, that we are doctors of the highest respect, credentials, and training that allows us to work side by side with allopathic and osteopathic doctors. While allied health professions such as Physician Assistants, Dentists, or Chiropractors have respect among the community, they do not hold such positions within hospital administration.

Podiatrists undergo a training model that is **equivalent** to allopathic and osteopathic clinicians. Doctors of Podiatric Medicine (D.P.M.) complete **4** years undergraduate school, a **4** year podiatric medical school, and finally a **3** year hospital based residency. This is standard among all podiatrists, a 4-4-3 model.

Podiatrists are also required in the state of Maryland to have **more** post-graduate training in order to be licensed in Maryland than our allopathic/osteopathic colleagues. While M.D. and D.O are require to only have 1 year of residency, podiatrists are required to have 2 years.

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SCOTT W. NUTTER, D.P.M.



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However, the standard being 4-4-3 among all DPMs in school, this goes above and beyond the states minimum requirements.

A title change to Podiatric Physician creates a better representation to the public of the type of specialty we are. In fact, Podiatrists are both surgeons and physicians of the foot and ankle. The name to Podiatric Physician bill better represents the training, experience, and skill sets that doctors of podiatric medicine have created for our patients as well as among the rest of the medical community.

I look forward to having the support of the Chair and its Committee Seantors in support of SB0311.

Sincerely,

Adam Lowy, DPM  
MPMA President-Elect

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**6a - SB 311 - EHEA - Podiatry Board - LOS.docx.pdf**

Uploaded by: Maryland Department of Health /Office of Governmen Bennardi

Position: FAV



# Board of Podiatric Medical Examiners

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Yvonne Umezurike, President – Eva Schwartz, Executive Director  
4201 Patterson Avenue, Baltimore MD 21215 Phone: 410-764-4785

## 2022 SESSION POSITION PAPER

**BILL NO:** SB 311  
**COMMITTEE:** Education, Health, and Environmental Affairs  
**POSITION:** SUPPORT

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**TITLE:** Health Occupations – Podiatric Physicians

### **BILL ANALYSIS:**

This bill will authorize the use of the name “Podiatric Physician” as an update to the present nomenclature of Podiatrist, in order to be aligned with the educational requirements for licensure that are in place and mandatory, as indicated in the Practice Act of the Board of Podiatric Medical Examiners and the respective COMAR.

### **POSITION AND RATIONALE:**

The Board of Podiatric Medical Examiners supports Senate Bill (SB) 311 - Health Occupations - Podiatric Physicians. The term “Podiatric Physician” is defined when analyzing the verbiage and context. The definition of “Physician” means someone who can practice medicine, while the definition of “medicine” is the practice of the diagnosis, treatment and prevention of disease. Therefore, a “Podiatric Physician” is someone who can practice medicine in relation to the foot and ankle. By definition, a Podiatrist is a doctor who diagnoses and treats disorders of the foot and ankle, while also providing preventative care to patients.

To become a Podiatrist, an applicant has to complete a four-year college degree and then is required by the majority of the schools to shadow a Podiatrist before they can even apply to a Podiatric Medical School. During the four intense years of Podiatric Medical School, the first two years of training are the same courses that other medical school students are required to take like pathology, anatomy, histology, microbiology, etc. The only difference is that Podiatry students are actually required to take additional courses such as biomechanics and lower anatomy. After finishing comprehensive science courses in the first two years of Podiatric Medical School, the remaining two years are clinical rotations and scrubbing into a very large variety of surgical cases. Once the four-year Podiatric Medical School is complete, the graduates are awarded the degree of Doctor in Podiatric Medicine (DPM), and they must match into a hospital-based residency Program, and complete the mandatory 3 years of residency in podiatric medicine and surgery. Some residents continue in a fourth and fifth year advanced and specialized fellowship programs.

The Maryland licensed podiatrists with delineated hospital and Ambulatory Surgical Centers' (ASC) privileges, perform surgical cases in their licensed ASC's as well as in the operating room. Podiatrists are surgically trained to do amputations, bunion removal, hammertoe correction, cyst/mass excisions, ulcer treatments, lateral ankle stability, etc. Podiatrists are surgically trained to fix any foot and ankle pathology. There are some medical doctors who are not trained to do any type of surgery, yet they are classified as physicians.

Adding the term "Physician" to Podiatry, brings Maryland in line with the 36 other states which classify their Podiatrists as "Podiatric Physicians". The rigorous and extensive training, the grit, the hard work applies to the term "Podiatric Physician."

By passing SB 311, Maryland will become the 37<sup>th</sup> state to recognize its Podiatrists with the appropriate title that they deserve and have earned, through coursework and clinical training, as well as their everyday clinical and surgical practice.

Thank you for considering this testimony. The Board of Podiatric Medical Examiners is respectfully requesting a favorable report on SB 311. If you require additional information, please contact Eva Schwartz, Executive Director of the Maryland Board of Podiatric Medical Examiners at (410) 764-4785 or at [eva.schwartz@maryland.gov](mailto:eva.schwartz@maryland.gov).

*The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.*

**6c - SB 311 - EHEA - Chiropractic Board - LOS.docx**

Uploaded by: Maryland Department of Health /Office of Governmen Bennardi

Position: FAV



# Board of Chiropractic Examiners

Larry Hogan, Governor - Boyd K. Rutherford, Lt. Governor - Dennis R. Schrader, Secretary

Joshua Levin, President – Sharon Oliver, Executive Director  
4201 Patterson Avenue, Baltimore MD 21215 Phone: 410-358-1879

February 10, 2022

The Honorable Paul G. Pinsky  
Chair, Senate Education, Health, and Environmental Affairs Committee  
2 West Miller Senate Office Building  
Annapolis, Maryland 21401

## **RE: SB 311 - Health Occupations – Podiatric Physicians – Letter of Support**

Dear Chair Pinsky and Committee Members:

The Maryland State Board of Chiropractic Examiners (the Board) is submitting this letter of support for Senate Bill (SB) 311 Health Occupations – Podiatric Physicians.

The bill allows for podiatrists to call themselves podiatric physicians. Podiatrists can use this term in advertising and signage. This term physician means a healer. Merriam-Webster defines physician as “a person skilled in the art of healing.” Podiatrists are medical professionals who are competent and qualified to call themselves podiatric physicians.

This change in the law is accurate and beneficial to the practitioner, and it will help podiatrists and not harm patients. It is also unlikely to cause confusion to the consumers of Maryland. For these reasons the Chiropractic Board respectfully requests that SB 311 receive a favorable report.

The Board hopes that this information is useful. If you would like to discuss this further, please contact me at Dr. Joshua Levin, 443-983-3993, [joshua.levin@maryland.gov](mailto:joshua.levin@maryland.gov). In addition, the Board’s Executive Director, Sharon Oliver, may be reached at 410-764-5985, [sharon.oliver@maryland.gov](mailto:sharon.oliver@maryland.gov).

Sincerely,

Sharon J. Oliver, MBA, Executive Director, on behalf of  
Joshua Levin, D.C., President

*The opinion of the Maryland State Board of Chiropractic Examiners expressed in this letter of support does not necessarily reflect that of the Department of Health or the Administration.*



**SB 311 RB Letter of support 2-8-22.pdf**

Uploaded by: Richard Bloch

Position: FAV



## **MARYLAND PODIATRIC MEDICAL ASSOCIATION**

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The Adams Building, Suite 301  
600 Baltimore Avenue  
Towson, Maryland 21204

Telephone: (410) 332-0736

Facsimile: (410) 332-0885

February 8, 2022

Senator Paul G. Pinsky,  
Chair, Education, Health, and Environmental Affairs Committee  
2 West Miller Senate Office Building  
11 Bladen Street  
Annapolis, MD 21401

Re: SB 169 Podiatric Physician  
Position: Support

Dear Senator Pinsky and Members of the Committee,

I am Executive Director and General Counsel to the Maryland Podiatric Medical Association, which represents approximately 260 of the approximately 400 podiatrists licensed in Maryland.

This letter is in support of SB 311 to change the term “Podiatrist” to “Podiatric Physician”. The original term for this profession was “chiropodist” and the level of education and training was significantly less than is provided and required today. A Chiropodist had a limited scope of practice providing only routine foot care. As the Podiatric Medical Schools revised and expanded their curricula and the training for the profession improved, the name changed to “Podiatrist”. The scope of practice has expanded in conjunction with the recognition of the education and training of podiatrists. Numerous bills have been enacted over the past 20 years recognizing the level of skill and training and the equivalency of the Doctor of Podiatric Medicine degree (D.P.M.) to the M.D. and D.O. degrees.

This bill does not change the scope of practice or any other aspect of practice, but merely defines a D.P.M. as a “Podiatric Physician”, thereby acknowledging the education and training that is now required to practice podiatry. A Podiatrist attends four (4) years of Podiatric Medical School, which is virtually identical to Allopathic Schools of Medicine. They both follow the 4-4-3 model of education and training: four (4) years-undergraduate, four (4) years-medical school and three (3) years-residency/post-graduate training.

Notably, an M.D. is only required to have one (1) year of post-graduate training to be licensed in Maryland (Health Occupation Article, Section 14-307; COMAR 10.36.01.03D(1)). A Podiatrist is required to have two (2) years of post-graduate training to be licensed (Health Occupation Article, Section 16-302; COMAR 10.40.01.05). The standard required by the podiatric profession is now three (3) years of residency training.

Senator Paul G. Pinsky/EHEA  
February 8, 2022

Thirty-six (36) states recognize D.P.M.s as “Physicians”: “Podiatric Physicians” (23), “Physicians who Practice Podiatric Medicine” (8), “Physician of the Foot and Ankle” or “Physician of the Foot and Leg” (5).

I would ask the committee to give SB 311 a favorable report.

Please contact me if you have any questions. Thank you.

Sincerely,

*Richard Bloch*

Richard Bloch

**Anthony Sclama, MD, MSB- SUPPORT.pdf**

Uploaded by: Sarah Peters

Position: FAV

33155 Lakewood Circle  
Unit 55093  
Bethany Beach, DE 19930  
February 3, 2022

Senator Paul Pinsky  
Chair, Education, Health, and Environmental Affairs  
Senate Office Building, 11 Bladen Street  
Annapolis, MD 21401

Re: SB311

Dear Senator Pinsky,

I am writing to you at the behest of Dr. Vincent Martorana regarding the Maryland Podiatric Medical Association and Maryland Bill HRB0428, which proposes changing the title of Podiatrist to Podiatric Physician.

As a physician who retired after 32 years in the medical field, 22 as a practicing Urologic Surgeon and nearly 12 years as a full-time member of the executive team at MedStar Franklin Square Medical Center, I feel adequately positioned to lend a favorable opinion to the re-designation proposed by HRB0428.

I have known Dr. Martorana both personally and professionally for virtually the entirety of our respective careers, and can vouch for his commitment in support of this legislation.

As Vice President for Medical Affairs and Chief Medical Officer from 2004 to 2015, I am thoroughly familiar with the hospital and medical staff requirements for practice privileges. The application and maintenance of privileges for Podiatrists is identical to that of all medical physicians. Specifically, active Board Certification in their designated specialty is required of all medical staff members. Although the Podiatric clinical privileges vary from medical physicians, as do the clinical privileges vary among medical specialties, the requirements to maintain privileges are the same for all medical staff members, of which Podiatrists are administratively considered co-equal members.

In addition, the Podiatrists are held to the same expectation of meeting the six core competencies of patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice as all other medical/surgical members of the medical staff, and are also held to the same expectations of quality care, safety, behavior, and citizenship as well.

As an example, Dr. Martorana himself has served as a member and Chairman of the Medical Executive Committee, which collaborates with the Chief Medical Officer in overseeing all the aforementioned requirements of the entire medical staff. He has also served as member and Chair of the hospital's Board of Directors, and also a member of the MedStar Board.

Based on my perspective as described above, Podiatrists serve as co-equal participants and members of the medical staff within the limits of their specific clinical privileges, as do all medical physicians. Accordingly, given my interaction with Podiatrists at the administrative level, I would be supportive of the re-designation proposed by Bill HRB0428.

Thank you for your consideration of my comments.

Sincerely,



Anthony Sclama, MD, MSB

# **Current Badges.pdf**

Uploaded by: Sarah Peters

Position: FAV

  
**SINAI HOSPITAL**  
*a LifeBridge Health center*

**PHYSICIAN**

[Redacted Name], **DPM**

**DISCHARGE SUMMARY** • admission/discharge date •  
• history • physical exam • hospital course • significant findings • procedure performed •  
discharge medications • condition on discharge • follow-up.

**LIFEBRIDGE**  
HEALTH

**Northwest Hospital**

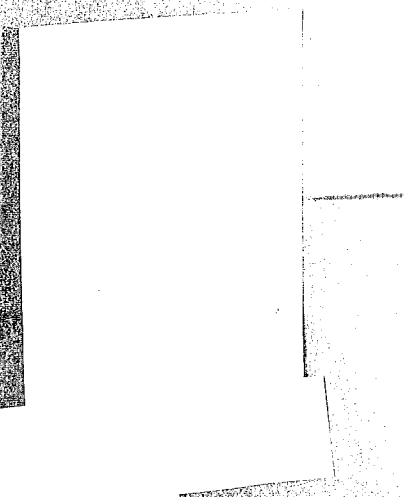
**PHYSICIAN**

// Job Control Number // Username  
You must be a valid user to gain access to the system. For assistance, contact  
Health Information Management at ext. 5753 or contact TRANSCEND at 1-800-205-7047.





UNIVERSITY of MARYLAND  
UPPER CHESAPEAKE HEALTH



, D.P.M.

PHYSICIAN

**David J. Sinopoli, MD- SUPPORT.pdf**

Uploaded by: Sarah Peters

Position: FAV

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# David J. Sinopoli, MD

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February 1, 2022

Senator Paul Pinsky  
Chair, Education, Health and Environmental Affairs  
Senate Office Building  
11 Bladen St.  
Annapolis, MD 21401

RE: SB 311

Dear Senator Pinsky:

I wanted to write to you in support of the many podiatrists with whom I have had the pleasure of working. I work in a busy, Baltimore-based anesthesia practice, where I frequently interact with podiatrists in the operating room. Our emergency department is one of the busiest in the state, and we see many patients that require surgical interventions by our podiatrist colleagues.

We work together to optimize medically complex patients for their upcoming surgical procedures, solve medical problems to ensure patients can safely undergo an anesthetic, and serve as partners in patient safety.

Podiatrists perform much needed and often emergent surgical procedures on our patients. Notably, CMS, the federal government and 36 other states refer to them as physicians; however, they are not referred to as such in the state of Maryland.

I believe the term "podiatric physician" better honors the services our colleagues provide and would like to support efforts at the state level to change this designation accordingly.

Sincerely,



David J. Sinopoli, MD

**Gabriel Del Corral, MD\_SUPPORT .pdf**

Uploaded by: Sarah Peters

Position: FAV



MedStar Health

9105 Franklin Square Drive, Suite 214  
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P 443-777-7631  
F 443-777-8667  
[MedStarHealth.org](http://MedStarHealth.org)

**MedStar Plastic and Reconstructive  
Surgery**

**Gabriel Del Corral, MD**

January 25, 2022

Dear members of the committee,

I am writing this letter in support of Senate Bill SB 311 which would alter the term “podiatrist” to be “podiatric physician”.

I have worked closely with my podiatric physician colleagues in a hospital setting and have witnessed firsthand their knowledge and expertise in diagnosing and treating foot and ankle conditions, specifically in the wound care setting. This medical profession and their degree, Doctor of Podiatric Medicine, is recognized as a physician specialty in the hospital, is recognized as a physician by Medicare CMS, and is recognized as a physician in 36 other states. It seems only fitting that Maryland also recognize their advanced training and medical expertise. My allopathic and osteopathic colleagues rely on their medical expertise as much as they rely on ours to help effectively treat our patients.

I give my full support and encourage your committee to pass this bill.

Professionally,

Gabriel Del Corral, MD  
MedStar Plastic and Reconstructive Surgery  
Assistant Professor of Plastic Surgery  
Director MedStar Center for Gender Affirmation  
Georgetown University Hospital  
Franklin Square Medical Center  
9105 Franklin Square Drive, Suite 214  
Baltimore, MD 21237  
443-777-7631

# **Michelle Bahrain D.O.- SUPPORT.pdf**

Uploaded by: Sarah Peters

Position: FAV



# MedStar Franklin Square Medical Center

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Baltimore, MD 21237  
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[www.medstarfranklin.org](http://www.medstarfranklin.org)

**Michelle Bahrain, D.O.**  
**Infectious Disease Consultant**  
**Franklin Square Hospital Center**

**Clinical Instructor**  
**Johns Hopkins University**

Senate Bill 311

HB 790

2/3/22

Senator Pinsky and Delegate Pendergrass,

I am writing this letter on behalf of my podiatric colleagues in Maryland. As an introduction, I am an infectious disease physician who has practiced at several locations in the state over the past 16 years. Currently, I am employed at MedStar Franklin Square Hospital in Baltimore.

I have a long history of working with podiatrists at my institution. I am proud to say that I have learned a great deal from them and consider them an essential part of a multidisciplinary team at our hospital. Given the severe foot infections we often see; we have a limb salvage team. This team includes podiatry, vascular, plastics, and infectious disease. We physicians all contribute our expertise in attempt to save the limbs and lives, if possible, of these very fragile patients.

When I graduated from my fellowship, I had some gaps in my training, as I initially wanted to do transplant infection. I started my work at Hopkins and then transitioned to private practice. I cannot tell you how invaluable the podiatrists were to me when I first started in private practice. My learning curve was a little steep the first year, as I saw many of these diabetic patients. However, the podiatrists at Franklin took me "under their wing" and taught me so much. They explained their surgical techniques so I could understand and always touched base with me regarding our mutual patients. In addition, we often rounded together on follow up patients. In this way, I became comfortable managing these patients in no time.

I believe that podiatrists are highly trained surgeons and an integral part of the health care team and that the title of podiatric physician is long overdue in Maryland.

Sincerely,

Michelle Bahrain, D.O.

# **Podiatric Physician One Pager.pdf**

Uploaded by: Sarah Peters

Position: FAV





## **MARYLAND PODIATRIC MEDICAL ASSOCIATION**

The Adams Building, Suite 301  
600 Baltimore Avenue  
Towson, Maryland 21204

Telephone: (410) 332-0736

Facsimile: (410) 332-0885

**Bill: Health Occupations- Podiatric Physicians**

**Position: SUPPORT**

**What Does it Mean to Practice Podiatry?** The Maryland Health Occupations Code defines the practice of podiatry as— “to diagnose or surgically, medically, or mechanically treat any ailment of the human foot or ankle, or any ailment of the anatomical structures that attach to the human foot.” A Podiatrist is someone who practice podiatry. *See* HO §16-101(f).

**What Does it Mean to Practice Medicine?** Under the Maryland Health Occupations Code, practicing medicine means— “to diagnose, heal, treat, or [perform] surgery.” *See* 14-101 (o). A physician is someone who practices medicine. *See* HO §14-101(M).

**Who Practices Podiatric Medicine?** Doctors of Podiatric Medicine (DPM)

To become a DPM, a person must:

- Graduate from an accredited graduate school or college of podiatry (4 years);
- Pass a 3-part exam administered by the Council on Education of the American Podiatric Medical Association (similar to the USMLE/COMLEX exam for MDs and DOs);
- Complete 3 years of residency; and
- Be licensed by the State Board of Podiatric Medical Examiners.

**Altering the title of “Podiatrist” to “Podiatric Physician”**

- **Thirty-six (36) other states** recognize Doctors of Podiatric Medicine as “Podiatric Physicians” (23), as “Physician who Practices Podiatric Medicine” ((8) or “Physician of the Foot and Leg (or Ankle)” (5).

DPMs **share many core education and training with MDs**. DPMs are required to attend a four-year degree program (the first two years are the same as the first two years of allopathic medical school). In the next two years, DPMs begin to specialize in podiatric medicine. A DPM’s residency requirements include anesthesiology, internal medicine, infectious disease, surgery, emergency medicine, and pediatrics – some of the same rotations as MDs. These are virtually identical to the requirements for MDs. DPMs specialize in the lower limb, just like specialty MDs, such as OB-GYN, Urology, Anesthesiology, etc.

- Based upon the education and training for practicing podiatry, Maryland podiatrists should currently be considered physicians as they diagnose, treat, and perform surgery.
- Many hospitals in Maryland identify Podiatrists as “Physicians” on their ID Badges.

Terminology matters to patients seeking treatment and to professionals who want to advertise their expertise.

**We respectfully request a favorable vote.**

# **Robert Paz, MD MS.- SUPPORT.pdf**

Uploaded by: Sarah Peters

Position: FAV

Robert Paz, MD MS

307 Merrie Hunt Dr  
Lutherville, MD 21093  
410-961-8881  
rpazmd@gmail.com

February 3, 2022

Senator Paul Pinsky  
Chair, Education, Health and Environmental Affairs  
Senate Office Building  
11 Bladen Street  
Annapolis, MD 21401

The Honorable Senator Paul Pinsky,

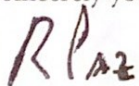
I am writing this communication in support of my podiatry colleagues pursuit of the title of "podiatric physician" with all the privileges, responsibilities and oversight pursuant to SB311.

I have had the honor of practicing inpatient Internal Medicine in co-management with the Franklin Square Podiatry Associates for the better part of 16 years. During that time I have experienced a mutually rewarding and collaborative relationship in caring for patients. It is because my professional experience with their clinical excellence that I have become impressed by and come to feel comfortable in supporting these efforts.

Their education, training and experience have proven to be the highest caliber of clinical excellence. I advocate that their title and MedChi should recognize that the term "podiatric physician" accurately reflects their scope and quality of practice. Currently both CMS and Medicare already recognize podiatrist as physicians. Their residency training includes interdisciplinary experience with rotations such as anesthesiology, internal medicine, infectious disease, surgery, emergency medicine, as well as pediatrics. This training combined with their practice experience are very much analogous to the internal medicine physicians whom MedChi currently represent.

I expect that recognizing and welcoming our podiatric colleagues into our membership will elevate the quality of care in our great State of Maryland. Please join me in strengthening our membership and scope of care in advocacy of SB311.

Sincerely yours,



Robert Paz, MD MS

# **2022 Senate Testimony- Vincent.pdf**

Uploaded by: Vincent Martorana

Position: FAV

February 8, 2022

**Bill: SB 311- Health Occupations- Podiatric Physicians**

**Position: SUPPORT**

Dear Chair, Vice-Chair, and Members of the Committee:

My name is Dr. Vincent Martorana and I have practiced podiatric medicine and surgery in our great State of Maryland since 1978.

I'd like to share with you that as a medical professional we serve side-by-side with our MD and DO physician colleagues. Not only at bedside providing patient care but also serving on hospital committees. In fact, it was an orthopedic surgeon that initially nominated me to the Medical Executive Committee (MEC) as well as recommending Podiatric Surgery be a section independent of Orthopedic or General Surgery.

Frankly, I have never felt that I was considered anything other than a podiatric physician. I was recently amused when I came across a copy of my commencement address to my classmates nearly 45 years ago in which I used precisely the same term, podiatric physician. "Physician" is a term that 36 States currently use to describe Doctors of Podiatric Medicine, yet Maryland lags behind.

We serve with our MD/DO colleagues in the roles of:

*Physician* Members of hospital Medical Executive Committees (MEC)  
Section Chiefs of our Divisions

Chief of Staff / President of the medical staff, a position elected to by *physician* colleagues

*Physician* Chair and Members of virtually every hospital committee including those that oversee peer review, disciplinary actions and privileging of all physicians.

*Physician* members on hospital Board of Directors

Even *Physician* Chair of the Board of Directors at a Baltimore Community teaching hospital

*Physician* member on the Board of MedStar Health, and their Quality, Safety and Professional Affairs Committee

*In fact, one of our podiatric colleagues is Chair of the Department of Surgery at MMGH and oversees ALL SURGEONS on staff.*

We respectfully request this committee approve the change in designation of podiatrist to podiatric physician as to more accurately reflect our education, training, and experience to the public.

For these reasons, I respectfully request your support for SB 311.

Sincerely,

Vince Martorana, DPM



**6b - SB 311 - EHEA - BOP - LoC .docx.pdf**

Uploaded by: Heather Shek

Position: UNF





# Board of Physicians

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Damean W.E. Freas Board Chair – Christine Farrelly, Executive Director

4201 Patterson Avenue, Baltimore MD 21215 Phone: 410-764-4777; Email: mbpmail.rcn.com

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## 2022 SESSION POSITION PAPER

**BILL NO.:** SB 311 – Health Occupations – Podiatric Physicians  
**COMMITTEE:** Education, Health, and Environmental Affairs  
**POSITION:** Letter of Concern

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**TITLE:** Health Occupations – Podiatric Physicians

### **POSITION & RATIONALE:**

The Maryland Board of Physicians (the Board) is submitting this Letter of Concern for Senate Bill (SB) 311, “Health Occupations - Podiatric Physicians.” This bill changes the term “podiatrist” to “podiatric physician” in certain articles of the Annotated Code of Maryland and authorizes publishers of the Annotated Code of Maryland to correct cross-references and terminology rendered incorrect under certain circumstances.

The Board has the following concerns:

- This bill will confuse the public. Title 16 of the Health Occupations (H.O.) Article is renamed “Podiatric Physicians.” The bill does not change the name of the State Board of Podiatric Medical Examiners. The Board licenses “physicians” and “physician assistants.” The Board also licenses naturopathic doctors, who are prohibited by statute from using the term “physician.” Confusion will exist if there is another group of health care practitioners in Maryland, regulated by a different health occupations board, utilizing the term “physician.”
- The definitions of “physician” and “practice medicine” in Title 14 of the H.O. Article remain the same. Clarification may be needed in 14-101 and possibly other sections of Title 14, because e.g., proposed language to H.O. 14-5F-14(b) includes “PODIATRIC PHYSICIAN” (Page 12, Line 13) and “podiatric physicians” would not be licensees of the Board.

Section 2 of the bill states: *“AND BE IT FURTHER ENACTED, That in every law, executive order, rule, regulation, policy, or document created by any official, employee, or unit of this State, podiatrists are renamed podiatric physicians, as provided in this Act.”* Despite this declaration, the Board believes that it would need to promulgate amended regulations to provide clarity and reduce confusion for the public.

Thank you for your consideration. For more information, please contact Matthew Dudzic, Health Policy Analyst, Maryland Board of Physicians, 410-764-5042.

Sincerely,

A handwritten signature in blue ink, appearing to read "Damean W. E. Freas".

Damean W. E. Freas, D.O.  
Chair, Maryland Board of Physicians

**The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.**

# **SB0311\_UNF\_MedChi\_Health Occupations - Podiatric P**

Uploaded by: Steve Wise

Position: UNF

# MedChi

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TO: The Honorable Paul G. Pinsky, Chair  
Members, Senate Education, Health, and Environmental Affairs Committee  
The Honorable Edward R. Reilly

FROM: J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone

DATE: February 10, 2022

RE: **OPPOSE** – Senate Bill 311 – *Health Occupations – Podiatric Physicians*

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The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **opposes** Senate Bill 311.

Senate Bill 311 would allow a podiatrist to be called a “podiatric physician.” MedChi believes that current law allowing the use of the term “physician” only by individuals licensed as medical doctors (“M.D.”) or doctors of osteopathy (“D.O.”) is the correct policy, and that this legislation should not be passed. To some, this may seem an unnecessary dispute over a single word. However, the word “physician” has had unique meaning in the policies enacted by the General Assembly and to the public. For its part, the Legislature reserved the term for use by those practicing medicine in Health Occ. § 14-602 and sought to prevent confusion between podiatrists and physicians when it enacted §16-401, stating that a podiatrist may not use “any word or abbreviation that suggests the licensee is licensed to practice medicine rather than podiatry.” Adding the word “physician” is certainly contrary to this policy. In short, the General Assembly has recognized this important distinction, but this bill reverses course and blurs the line.

The general public also assigns special meaning to the term physician, recognizing it as identifying a person that has been to medical school. A survey by the American Medical Association showed that 88% of respondents agreed that only licensed medical doctors or doctors of osteopathic medicine should be able to use the title of “physician.” Adding ‘physician’ to the title of a podiatrist implies something different than what most health care consumers assume and adds unnecessary confusion to an already perplexing world of health care. Recognizing that health care consumers can be confused by the plethora of providers, the General Assembly in 2013 required all health care providers to wear badges identifying the type of license they hold. The patient who sees the term “physician” on a badge may have certain expectations, particularly in an acute care situation, and not appreciate the more limited scope of practice

of the “podiatric physician”.

Finally, should the Committee choose to pass this legislation and put podiatrists on equal footing with MDs and DOs, it should finish the job. As physicians, “Podiatric Physicians” should be licensed and regulated by the Board of Physicians. The same disciplinary grounds and requirements applicable to physicians and their licensure, with the disclosure of medical malpractice insurance, the posting of charging documents for those facing discipline, and other similar regulatory requirements incumbent upon MDs and DOs, should be made applicable to podiatrists. The need for a separate podiatry board would be eliminated, and significant cost savings to the State would be realized.

For the reasons set forth above, MedChi asks that the Committee oppose this legislation.

**For more information call:**

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410-244-7000