

American Board of Podiatric Orthopedics and Primary Podiatric Medicine

Policy Manual

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INTRODUCTION

Policy Authority and Objectives

In accordance with the bylaws, Article VII, Section 1, the Board of Directors has approved the following policies to enable the membership, elected and appointed officials and other organizations that have relationships with the American Board of Podiatric Orthopedics and Primary Podiatric Medicine to understand the policies under which the organization operates.

Terms and Definitions

Throughout these policies, use of the term "member", "Board Qualified" or "Diplomate" includes and applies to all individuals within the members' organization. The term "Board" refers to the American Board of Podiatric Orthopedics and Primary Podiatric Medicine.

Parliamentary Authority

The deliberations of the Board, Board of Directors and committees shall be governed by the parliamentary rules and usages contained in the then current edition of "Robert's Rules of Order, Newly Revised" when not in conflict with the Bylaws of the Board.

Discrimination

The ABPOPPM shall assure that the activities of the Board are undertaken without any discrimination with regard to race, color, age, religious creed, national origin, ancestry, physical handicap, medical condition, marital status, sex, or certification status.

Disabled Access

The ABPOPPM shall make reasonable effort to schedule facilities for all meetings and/or examinations that have access for disabled attendees.

GOALS AND OBJECTIVES

GOALS OF ABPOPPM

1. To protect the health and welfare of the public.
2. To evaluate the competence of podiatrists in the specialty of podiatric medicine and orthopedics through the board certification examination process.
3. To conduct the examinations in accordance with standard parameters and procedures that assure psychometric validity and reflect the depth and breadth of podiatric medicine and orthopedics.
4. To delineate the skills, knowledge and attitudes necessary for the competent practice of podiatric medicine and orthopedics.
5. To function as a specialty board in complete compliance with the policies and procedures of the Joint Committee on the Recognition of Specialty Boards and by the Council on Podiatric Medical Education.

OBJECTIVES OF ABPOPPM

1. To create the examinations in accordance with well-established principles and practices, including an examination committee composed of Diplomates who are geographically well represented and who reflect a variety of practice settings within the specialty of podiatric medicine and orthopedics.
2. To utilize an appropriate external testing agency to assess the examination instrument and examination process for validity and reliability. The agency will participate in the administration and scoring of the examination.
3. To establish standards of advertising board certified status by the Diplomates, and to enforce penalties for violations of conduct not in keeping with those standards.
4. To make available information to hospitals, health care organizations and other individuals and groups deemed appropriate by the board that includes published lists of those individuals who have been certified and the criteria for certification.
5. To provide information to the podiatric medical community about ABPOPPM and the specialty of podiatric medicine and orthopedics.
6. To encourage the American College of Foot and Ankle Orthopedics and Medicine (ACFAOM), as the educational vehicle for ABPOPPM, to create seminars, educational programs and literature to maintain and enhance competence. To coordinate with ACFAOM for the implementation and approval of residency programs leading to certification in podiatric medicine and orthopedics.
7. To provide input to, and receive feedback from, the Joint Committee on the Recognition of Specialty Boards and the Council on Podiatric Medical Education and its committees through representatives of ABPOPPM. To collaborate with the Council on Podiatric Medical Education or other accepted accrediting body in the development of standards and requirements for the evaluation and enhancement of advanced postgraduate education programs.
8. To provide background, technical information, and Board representation to relevant committees of the APMA, LCPMEP, Council on Teaching Hospitals (COTH) of the American Association of Colleges of Podiatric Medicine (AACPM), and other organizations and committees where mutual benefit may be gained by interaction with the Board and its representatives.
9. To ensure that the activities of the ABPOPPM are conducted without prejudice with regard to race, sex, religious affiliation, age, national origin, disability, medical condition, marital status or certification status in other organizations.

Legal Counsel

The ABPOPPM shall retain legal counsel. All requests from staff and members for legal assistance shall be referred to the President for coordination and disposition. The Executive Director shall consult with the President before engaging legal counsel on any new matter. In the absence of the President, the Executive Director shall consult with the Vice-President. In the absence of both the President and the Vice-President, the Executive Director shall consult with at least one member of the Executive Committee. Any communication received by the ABPOPPM from governmental bodies, notice of suit, subpoenas or any other similar legal communication should be brought to the immediate attention of the Executive Director. If a government official approaches any member or staff person, officer of the court or litigant the member or staff person should refer all inquiries to the Executive Director. Under no circumstances should members or staff persons respond to any inquiries from outside parties regarding the ABPOPPM's legal affairs.

Diplomate Assistance

The Board realizes that it is in both its own interest and that of its diplomates to assist in certain circumstances where the ABPOPPM credentials appears to be discriminated against or is otherwise not accepted by third party payers, managed care organizations, hospitals or other health care organizations. The Board of Directors also realizes that it may not be appropriate or possible to provide assistance or support in all such circumstances. The Board, therefore, resolves that monies may be allocated on an annual basis for the purpose of providing travel expenses and other appropriate reimbursements to individuals that the Board authorizes to assist diplomates for the purpose set forth above. Such funds may be used at the discretion of the Board of Directors, upon request of the Credentials Committee and approval by the Board of Directors.

Personnel

The Board of Directors shall have the power to employ such personnel as it deems necessary to appropriately manage the affairs of the corporation and carry out its policies and objectives. The Board of Directors shall negotiate the compensation of consultants.

Eligibility for Retirement Plan

Regular employees of the Board are defined as the Executive Director and headquarters staff that receive W-2 wages from the Board and have appropriate taxes and deductions made from their paychecks. Only regular employees are eligible for any retirement plan of the ABPOPPM (pension, 401K, etc). Officers and Directors of the Board, as well as consultants and independent contractors, are specially excluded.

Executive Director Responsibilities

The Board of Directors may appoint an Executive Director to serve as the chief executive and operating officer of the Board. The Board of Directors shall determine the terms and duties of such appointment.

As per Article VIII, Section 11 of the Bylaws, the Board of Directors may appoint an Executive Director to serve as the chief executive and operating officer of the Board. The Board of Directors shall determine the terms and duties of such appointment. The Executive Director position as it has evolved over the years currently encompasses, but is not limited to, the following:

Examination Committee:

- ∞ Obtain and negotiate hotel contract for meeting
- ∞ Communicate with hotel on space and meal requirements
- ∞ Attend meetings and assist with in-servicing written and oral committee members in psychometric aspects of question development
- ∞ Follow-up with written and oral chairs on required edits and preparation of materials for follow up meetings and field tests
- ∞ Assist exam chairs and psychometrist in choosing equator questions for written examination

Re-certification / Self-assessment Committee:

- ∞ Assist in choosing self-assessment questions from item pool and prepare for field testing
- ∞ Assemble self assessment examination and forward to Committee Chair for final approval
- ∞ Coordinate with Webmaster in preparation for examination to be placed on web site.

Headquarters:

- ∞ Oversee staff hiring and manpower requirements; authorize and coordinate coverage for staff vacations, absence, etc.
- ∞ Oversee and communicate with staff on operational tasks, e.g. dues billing, mailings, logistics
- ∞ Monitor and oversee requirements of the physical plant, including furniture, computer and software needs and arrange for maintenance.
- ∞ Contract or otherwise obtain and communicate with vendors for printing, copying and mass mailing needs
- ∞ Coordinate advertising placement for board examinations
- ∞ Oversee Newsletter production and mailing
- ∞ Oversee and enforce the expense reimbursement guidelines of the organization for directors, committee members and consultants
- ∞ Oversee website updates as required
- ∞ Communicate with legal entities for maintenance of Trademark and annual report to the State of Illinois
- ∞ Communicate with members verbally and in writing regarding multiple issues, i.e., how to prepare cases, difficulties with staff access or membership, explanation of information in mailings newsletters, residency issues, CPME issues, etc.
- ∞ Communicate with other organizations, e.g., CPME, COTH, ACFAOM, ABPS, PRR, APMA, etc.
- ∞ Make bank transfers as required and oversee establishment and rollover dates of certificates of deposit.
- ∞ Review monthly AMEX statement for accuracy and allocate charges to appropriate class and category
- ∞ Obtain annual operational review and tax return from accountant

Examinations:

- ∞ Plan and coordinate examination administration.
- ∞ Obtain and negotiate hotel contract.
- ∞ Communicate with hotel on space and meal requirements.
- ∞ Determine exam personnel requirements and communicate with examiners
- ∞ Arrange for proctors
- ∞ Create master schedule of events and master candidate flow sheet.
- ∞ Supervise production of oral examination packets for examiners; supervise production of written examination booklets and their distribution
- ∞ In-service proctors on administration and collection of written booklets
- ∞ Work with psychometrist in the development of score sheets, exam report sheets and data reporting to candidates
- ∞ Conference with exam Chairs, President and psychometrist on summary data of examination
- ∞ Proof letters and oversee reporting process of candidate results
- ∞ Facilitate Case Documentation Review process for certification and re-certification
- ∞ Communicate with candidates in writing regarding examples of why their cases failed

Board of Directors and Board Committees:

- ∞ Participate in scheduled conference calls
- ∞ Obtain and negotiate hotel contract for BOD meeting; communicate with hotel on space and meal requirements
- ∞ Obtain an annual operational review
- ∞ Obtain an independent outside audit on behalf of the Board of Directors under the recommendation of the Budget/Audit committee.

Section I Organizational Policies

- ∞ Present monthly financial reports and analysis to the Budget/Audit Committee for review and approval
- ∞ Work with the Budget /Audit Committee to present an annual budget for approval by the Board of Directors.

Note: also refer to annual budget process in section entitled “financial authority”

- ∞ Present monthly Executive Director Activity reports to the Board of Directors outlining weekly time allocation, travel for board purposes, vacation/sick time use, headquarters updates: personnel status, technology issues, (other as needed or requested).
- ∞ Assist Treasurer, and committee Chairs in developing the annual budget
- ∞ Forward credentials related letters and other matters to Credentials Committee for action
- ∞ Assist Credentials Committee in development of board policy
- ∞ Review Policy Manual and Bylaws for needed updating and make recommendations to Chair of Bylaws committee
- ∞ Communicate with Newsletter Editor on needs for the newsletter. Proofread articles.

Conflict of Interest

This conflict of interest policy has been adopted to ensure that individuals who act on the Board's behalf are motivated by the Board's best interests and act in furtherance of the Board's mission. Conflict of interest situations should be avoided whenever possible, and otherwise disclosed and handled in good faith in accordance with the following principles:

1. Persons nominated or appointed for positions of responsibility within the Board shall represent and warrant that they have no actual or potential conflict of interest (professional, financial or otherwise) with the goals and missions of the Board.
2. Persons holding positions of responsibility within the Board promptly shall disclose to the Board of Directors any transactions, interests and relationships which subsequently may arise and which have the potential for creating a conflict of interest with the Board.
3. Once a disclosure is made, the Board of Directors shall determine if any actual or potential conflict of interest is material to the ability of that person to serve in a position of responsibility within the Board or to carry out any of that position's responsibilities or duties. If the Board of Directors determines that an actual or potential conflict of interest is material, upon notification of a conflict of interest the Board of Directors may do the following:
 - a. require that such person decline any nomination or appointment or resign their position or
 - b. prohibit such person from participating in that particular situation or decision-making process in which the conflict is specifically material.

Order of Business for the Annual Meeting of Members

The President will determine the order of business for the annual meetings. The following is a guideline for the appropriate order of business:

- a. Call to order by the President
- b. Report of the President
- c. Report of Executive Director
- d. Report of Treasurer
- e. Report of Examinations Committee
- f. Report from Other Committees
- g. New Business
- h. Unfinished Business

Order of Business for the Annual Meeting of Directors

- a. Call to order by the President
- b. Role call of Directors
- c. Adoption of Agenda
- d. Approval of Minutes
- e. Report of the President
- f. Executive Committee Reports
- g. Other Committee Reports
- h. Old Business
- i. Executive Director Report
- j. Executive Session
- k. New Business
- l. Unfinished Business

Corporate Seal (Trademark)



Relationships with Other Organizations

At times the interests of the Board may be furthered by the participation and/or membership of the Board in other professional organizations. Additionally, the interests of the Board may be furthered by participation in Board activities by representatives from other such organizations.

The Board shall provide an annual report and other information requested to the Council on Podiatric Medical Education's Joint Committee on the Recognition of Specialty Boards.

Individuals may be designated to represent the Board's views and positions in specific areas to various other organizations. Such representations may range from presentations on the Board's behalf, to making statements of position and voting in the Board's name. All such individuals must be so designated by the President and must report in writing all actions taken in the Board's name. Commitment of the Board to specific policies or plans of action, or commitment of Board resources requires ratification by the Board of Directors.

Nominating Committee

In accordance with the bylaws, Article IX, Section 2, the Nominating Committee sets forth and publishes the guidelines and policies by which candidates are nominated for positions on the Board This is kept in a separate document entitled Guidelines for the Nomination of Candidates to the Board of Directors.

Use of the ABPOPPM Directory

The directory or any portion thereof may be made available to a person, business or organization for purposes of solicitation, dissemination of information, etc. when it is felt that the contents of the proposed mailing could be beneficial to the Board's membership and/or subscribers. The mailing list may not be used for any purpose other than that which was initially authorized. A copy of the correspondence requesting the directory will be maintained in the headquarters office. The Board of Directors has authorized the Executive Director to approve requests for the use of the directory. The Executive Director shall upon his discretion, seek opinion of the Executive Committee where conflict of interest or unsuitable usage is suspected. An appropriate fee may be imposed on any person, business or organization for use of the directory.

Books and Records

Any member, or his or her agent or attorney may inspect the following books and records, for any proper purpose at any reasonable time:

Membership roster	General correspondence
Financial records	Meeting minutes
Committee schedules	Promotional materials
Policy Manual	Bylaws

Financial Authority

Fiscal Year:

The fiscal year shall run from January 1 through December 31 of each year. All membership related assessments, such as re-registration fees, examination fees and special assessments will correspond to this fiscal year. All revenues from other sources, such as sale of the annual directory, verifications, etc., will correspond to this fiscal year.

Annual Budget Process:

The Executive Director and the Budget Committee will work together to present an annual budget for approval by the Board of Directors. The budget will be structured to allow for fiscally responsible management and growth of Board funds, which will provide membership benefits and services as may be determined. It shall be a commitment of the Board to establish and contribute regularly to the fund balance as insurance against an unforeseen disaster necessitating expense.

Exceptions to Budget:

Upon approval of a fiscal budget by the Budget/Audit Committee, and adoption by the Board of Directors, the Budget/Audit Committee and the Board of Directors may spend no further funds without documented approval. The Treasurer may represent the Budget/Audit Committee in any decision for approval when a majority of the committee is not available; the Executive Committee may represent the Board of Directors when a majority of the Board is not available.

Checking Account Authorizations:

The authorized signers on Board checking accounts shall be as follows: Executive Director, Treasurer, and President. The Executive Director shall have the authority to sign checks in amounts up to and including \$1,000. All checks exceeding \$1,000 will require a second signature by the Treasurer. In the Treasurer's absence the President may provide the additional signature.

Contractual Agreements

The Executive Director shall have the authority to execute and authorize contracts and purchases on behalf of the Board as approved or directed by the Board of Directors. Existing contracts should be periodically reviewed for the purpose of cost evaluation. Services provided without written contracts will also fall under this guideline. In carrying out this license for any new vendors, requests for proposals (RFPs) will be sent out to a minimum of 3 vendors for any service or product that will exceed \$1000 in cost. Should one vendor be selected over another, that exceeds the lowest bid price by more than 25%, then that recommendation must be forwarded to the Treasurer for review prior to the completion of the contract or service agreement. Copies of all contracts or agreements executed on behalf of the Board will be sent to the Treasurer.

Note: refer to section entitled Executive Director for additional policies

Independent Audits and Operational Reviews

The Board has a fiscal responsibility to collect, maintain and spend its funds in a prudent fashion. Prudent stewardship requires establishing sound internal financial review procedures to accomplish this objective. The Executive Director will obtain an operational review of its fiscal activities by a licensed CPA on an annual basis. The Board may periodically obtain an independent audit by an outside CPA.

Examination Fees

The Board of Directors shall determine the amount of all fees for the examinations. These fees must be paid in full prior to participating in the examination process.

Expense Reimbursement Guidelines

The Executive Director shall oversee and enforce the expense reimbursement guidelines.

Policy on Travel, Entertainment and Other Business Expenses for Directors, Committee or Subcommittee Members, Examiners, Proctors, Evaluators, Speakers

General Policy:

This statement of policy has been prepared in order to establish consistent standards and guidelines, thereby ensuring consistent and fair treatment for all members and others who shall, from time to time, be entitled to reimbursement of expenses related to travel, entertainment or other business expenses on behalf of the Board. It is intended as a guide, both for those authorized to approve expense statements, and for those who will seek reimbursement.

It is the policy of the Board to reimburse certain individuals for their travel related expenses.

Generally, individuals covered by this policy or any part of this policy will be reimbursed for those normal types of business expenses that are incurred as a result of the individual's service to the Board. Individuals eligible for reimbursement are reminded that funds expended are those of the general membership and therefore should be expended conservatively at all times.

No expenditure by an individual shall be reimbursed in any case where the direct disbursement by the Board of that item would not be permissible under other policies, as a matter of law or I.R.S. regulations.

Individuals will be reimbursed for the meeting dates, and travel days when meeting participants cannot make timely travel arrangements on the day the meeting begins. Expenses over and above the meeting days and travel days will be the responsibility of the board member, committee member, etc.

Coordination of Expenses:

From time to time an individual traveling on Board business may elect to stop-over at a different location or extend their stay longer, or both, for personal or non-Board business. The Board will reimburse the submitter for the amount expended for Board business only.

Ground Transportation and Related Expenses:

Ground transportation and parking will be reimbursed up to taxicab fare. The use of taxis, where timely reasonable or free public transportation is available, is specifically discouraged. The use of rental cars is acceptable if it benefits the Board, i.e. creates a savings for multiple individuals traveling together or eliminates the necessity of a hotel room. The use of personal cars will be reimbursed at the current IRS rate for transportation from a member's home to meeting location not to exceed regular coach airfare. The use of personal cars will also be reimbursed at the current IRS rate for transportation to and from point of departure, i.e. airports, train stations, etc.

Airfare

The use of a specific travel agency for Board business requires prior approval by the Board of Directors.

The Board will reimburse coach airfare up to a maximum of \$750 without prior approval by the Executive Director. Individuals traveling on Board business should generally use discounted coach airfares and should purchase a ticket a minimum of 14 days in advance, with the lowest possible airfare. The Board will allow preference of airline carrier, or specific time, if the charge does not exceed \$50 one-way or \$100 round trip above the lowest airfare. It is recognized that individuals may need to change their travel plans on short notice, resulting in a fee or change in discounted fares; however, generally discounted fares and fees for changes will be less expensive than full fare coach tickets. It is for this reason that discounted fares should be used when available. If a fee is charged in order to make last minute changes that is beyond the control of the traveler this fee will also be reimbursed. The use of electronic tickets is required. Any fees incurred through the use of paper tickets, or any other fees generated for the convenience of the traveler will be paid at the traveler's expense.

Hotel Room:

If an individual is eligible for hotel room reimbursement, all such costs will be reimbursed up to normal room rate. Individuals entitled to hotel room reimbursement shall use complimentary hotel rooms where available.

Meals:

Individuals will be reimbursed a daily per diem, which will be determined by the Treasurer, and/or consensus of the Executive Committee. Per-diem allocation includes meals, and other related expenses, excluding hotel and airfare.

When group functions are planned which include a meal and where the cost is guaranteed, those who commit to the function and choose not to attend will not be reimbursed for the cost of an alternative meal. Specific dietary needs will be addressed on an individual basis. When group meals for board of directors or other approved committee functions are utilized, a maximum of \$75 per person will be covered. All expenses over that amount will be the responsibility of the individual.

Communications and Delivery:

The cost of reasonable expenses for telephone or other communications media will be reimbursed for those individuals whose communications expenses are specifically reimbursed by policy. Where possible, telephone credit cards should be used to minimize surcharges levied by hotels.

Spouses/Guests Reimbursable Expenses:

Travel expenses for a member's guests will not be reimbursed. An exception may be made by the Board to cover the meal and entertainment expenses of guests/spouses when attending a group function organized by the Board. Other than group functions, meal and entertainment expenses of a guest will not be reimbursed.

Other Expenses:

Other expenses that an individual might incur as a result of authorized travel on behalf of the Board will be reimbursed where deemed appropriate by the person approving the expense statement. If the person approving the expense statement is uncertain as to whether or not a particular expense should be reimbursable, the expense statement will be reimbursed excluding the questionable item. As soon as possible, the questionable expense item will be referred to the members of the Executive Committee for approval/disapproval.

It is recommended that members planning to travel on Board business where expenditures not specifically covered by this policy will be incurred seek clarification regarding reimbursement from the Executive Director.

Accounting for Expenses:

Each member and/or consultant requesting reimbursement for travel related expenses shall complete the Board's travel expense statement within sixty (60) days after the trip is completed. Expense statements received more than sixty (60) days after the trip is completed, shall be referred for approval by the Board of Directors at the next meeting, with appropriate explanation for lateness. Expense statements relating to the reimbursement of telephone and/or postage costs only shall be reimbursed upon receipt as long as the period of time covered does not exceed three (3) months since the first expenditure was incurred.

Original receipts must accompany the expense reimbursement request for all individual expenses of \$25.00 or more. If the original receipts cannot be provided due to accounting reasons, a signed statement indicating that the original receipts are unavailable must accompany the expense report.

Code of Ethics

SECTION 1: PRINCIPLES OF ETHICS

This Code does not purport to include the entire field of podiatric medical ethics. The podiatrist is charged with many duties and obligations in addition to those set forth herein. Furthermore, every member of this Board shall be bound by the Code of Ethics. The Principles of Ethics form the first part of this Code of Ethics. They are aspirational and inspirational model standards of exemplary professional conduct for all members of the Association. These Principles should not be regarded as limitations or restrictions, but as goals for which members should constantly strive.

- A. Ethics in Podiatric Medicine: Ethics are moral values.** An issue of ethics in podiatric medicine is resolved by the determination that the best interest of the patient is served.
- B. Providing Podiatric Medical Services:** Podiatric medical services must be provided with compassion, respect for human dignity, honesty, and integrity.
- C. Competence of the Podiatrist:** A podiatrist must maintain competence by continued study. That competence must be supplemented with the talents of other professionals and with consultation when indicated.
- D. Communication with the Patient:** Open communication with the patient is essential. Patient confidences must be safeguarded within the constraints of the law.
- E. Fees for Podiatric Medical Services:** Fees for podiatric medical services must not exploit patients or others who pay for the services.
- F. Identification of the Deficient Podiatrist:** Those podiatrists who engage in fraud or deception should be identified to appropriate authorities.
- G. Ethical Rules:** It is the duty of a podiatrist to place the patient's welfare and rights above all considerations. To this end one must subscribe to ethical rules, which are for the benefit of the patient.

SECTION 2: RULES OF ETHICS

The Rules of Ethics form the second part of this Code of Ethics. They are mandatory and direct specific standards of minimally acceptable professional conduct for all members of the Board. The Rules of Ethics are enforceable for all members.

- A. Competence:** A podiatrist should perform only those procedures in which the podiatrist is competent by virtue of specific training or experience or is assisted by one who is. A podiatrist must not misrepresent credentials, training, experience, ability, or results.
- B. Patient Consent:** The performance of medical or surgical procedures shall be preceded by appropriate informed consent.

- C. Clinical Investigative Procedures:** Use of clinical investigative procedures shall be approved by adequate review mechanisms. Appropriate informed consent for these procedures must recognize their special nature and ramifications. A clinical investigative procedure is a method used to evaluate authenticity or efficacy of a procedure or technique.
- D. Other Opinions and Referrals:** Additional opinion(s) shall be obtained if requested by the patient. Consultation(s) shall be obtained or referral(s) made whenever the welfare of the patient will be safeguarded or advanced by having recourse to practitioners who have special skills, knowledge, and experience.
- E. The Impaired Podiatrist:** A physically, mentally, or emotionally impaired podiatrist should withdraw from those aspects of practice affected by the impairment. If the podiatrist does not withdraw, it is the duty of other podiatrists who know of the impairment to take action to attempt to prevent him/her from harming themselves or others.
- F. Preoperative Assessment:** Surgery shall be recommended only after a careful consideration of the patient's physical, social, emotional, and occupational needs. The preoperative work up must document the indications for surgery. Performance of unnecessary surgery is an extremely serious ethical violation.
- G. Postoperative Care:** Medical and surgical aspects of postoperative podiatric medical care provided by a qualified podiatrist until the patient has recovered, are an integral part of patient management. If necessary, postoperative care is not or will not be personally provided, the podiatrist must make arrangements with the mutual approval of the patient and of another qualified podiatrist or qualified practitioner of another branch of medicine who will provide postoperative care. Fees should reflect those arrangements with advance disclosure to the patient. In making those arrangements, the podiatrist must place the patient's welfare above all other considerations.
- H. Delegation of Podiatric Medical Services:** When a podiatrist delegates aspects of medical care to auxiliary health care personnel, the podiatrist must be assured that such personnel are qualified and adequately supervised. In delegating services, the podiatrist must place the patient's welfare above all other considerations. Delegation is defined as the assignment of specific services that need not be performed by the podiatrist personally.
- I. Medical and Surgical Procedures:** A podiatrist must not misrepresent the services that are performed or the charges made for those services.
- J. Procedures and Materials:** A podiatrist should order only those procedures, devices, or pharmacological agents that are in the best interest of the patient. Ordering unnecessary procedures or materials for pecuniary gain is unethical.
- K. Commercial Relationships:** A podiatrist's clinical judgement and practice must not be affected by economic interest in, commitment to, or benefit from professionally related commercial enterprises. The foregoing shall not limit membership or participation in health maintenance organizations, preferred provider organizations, or similar entities.

- L. Communications to Colleagues:** Communications to colleagues on research, including clinical investigations, must be accurate and truthful. Appropriate disclosure of commercial interest is required.
- M. Communications to the Public:** Communications to the public must be accurate. They must not convey false, deceptive, or misleading information through statements, testimonials, photographs, graphics, or other means. They must not omit material information, without which the communication would be deceptive. If communications (i.e. to the public) refer to benefits that involve significant risks, realistic assessments of safety and efficacy must also be included, as well as the availability of alternatives and, where necessary to avoid deception, descriptions and/or assessments of the benefits or other attributes of those alternatives. Communications must not appeal primarily to an individual's anxiety or create unjustified expectations of results. Communications must not misrepresent a podiatrist's credentials, training, experience or ability and must not contain material claims of superiority that cannot be substantiated. If a communication results from payment by a podiatrist, this must be disclosed unless the nature, format, or medium makes it apparent.
- N. Professional Title:** A podiatrist may use in connection with his/her **name** the titles, degrees, or designations authorized by law in his/her state. The title "doctor" or any abbreviation thereof, cannot be used without the qualification "podiatrist" or "podiatric medicine—treatment of the foot and ankle," or other appropriate designations following the name. A podiatrist who has been certified by ABPOPPM, a specialty board recognized by the JCRSB, may use the appropriate term in connection with his/her specialty, as defined in the policy manual.
- O. Split Fees, Commissions, and Rebates:** It is unethical for podiatrists to pay or accept commissions in any form or manner on fees for professional services, references, consultations, pathology reports, medical imaging studies, prescriptions, or on other services or articles supplied to patients. Division of professional fees, or acceptance of rebates from fees paid by patients to x-ray, clinical or other laboratories, shoe stores, or other commercial establishments is unethical. It is unethical for a podiatrist to pay for the recommendation of a patient. The division of revenue in a partnership is outside the scope and application of this rule.
- P. Patents and Copyrights:** The podiatrist has the obligation of making the fruits of **his/her** discoveries and labors available to all when they are useful in safeguarding or promoting the health of the public. Patents and copyrights may be secured by a podiatrist provided that they and the remuneration derived from them are not used to restrict research, practice or the benefits of the patented or copyrighted material.
- Q. Waiver.** Any member feeling aggrieved by reason of the enforcement of this code may submit a written request for waiver of specific provisions thereof and the reasons therefore, to the Board of Directors and Credentials Committee which is authorized to grant said request upon good cause being shown therefore.

Examination Fees

The Board of Directors shall determine the amount of all fees for the examinations. These fees must be paid in full prior to participating in the examination process.

Annual Re-registration Requirement:

- A. With the exception of individuals noted in section B, re-registration and dues payment is required of all active members beginning in 2007. Founders and Emeritus members less than 65 years of age (with 25 years of membership) are subject to reduced annual dues. Diplomates granted Emeritus status prior to 2007 are not affected by this change in re-registration policy.

The Board of Directors shall establish the annual re-registration fee. Such fee shall be due and payable by February 1st of each calendar year.

- B. A Diplomate who:
- a. has completely retired from active practice, or
 - b. who holds an Emeritus status, and is at least 65 years of age (with 15 years of diplomate status) or
 - c. who is not actively deriving any portion of their income from the profession of podiatry, or
 - d. who has a current disability that precludes their ability to practice podiatry

shall not be required to re-register but shall continue to be considered a Diplomate. A Diplomate must provide appropriate verification of retirement, inactivity, or disability, to the Board of Directors for their review and approval, following the rules of retirement or life membership qualification of the APMA. Diplomates who are disabled* or inactive** in podiatry must provide verification of such status to the board on an annual basis.

*Note: Disabled as defined herein means that the Diplomate can adequately document a medical disability that precludes their ability to temporarily or permanently practice the profession of podiatry.

**Note: Inactive as defined herein means that the Diplomate can adequately document that they derive no income from the profession of podiatry on a part-time or full-time basis.

The Board of Directors shall determine the re-registration fee (dues) for Diplomate members and for board qualified members. Annual re-registration fees are due postmarked within 60 days of the date appearing on the first notice. Payments received after that date will incur a late fee determined by the Board.

Suspension of status:

Members whose status has been suspended will have that information communicated to credentialing organizations requesting verification of the member's status with the Board. A suspended member may be reinstated by payment of the annual registration fee and late fee, provided that such payment is made postmarked within 30 days of the notice of being in arrears (i.e. second notice). If payment is not received by the due date of the second notice, a final notice will be mailed via certified mail.

Revocation of status:

If the above-mentioned fees are not paid by the date indicated on the final notice the member's status shall be revoked. Once revoked, reinstatement is subject to approval by the Board of Directors, and requires a reinstatement fee equivalent to the fee for the current certification or board qualification examination as is appropriate to the member's status at the time of revocation.

Continuing Education

Diplomates shall participate in continuing education programs to maintain their competence and to increase their knowledge in the art and science of primary podiatric medicine and podiatric orthopedics. All Diplomates, except those who are retired, inactive or disabled, shall certify that they have completed 50 continuing medical education credits during a two-year period.

Requirements for Board Qualification and Board Certification

BOARD QUALIFICATION

Board Qualification candidates require two years of CPME-approved postgraduate training which must include at least one of the following residency types: PPMR, POR or PM&S. For example a training sequence inclusive of a PPMR+PSR would be eligible because the candidate had a qualifying residency and equal or more than the requisite two years of training. A PPMR + POR sequence, etc., would qualify as well. PM&S candidates with no other CPME approved training may apply only in their final year of residency training.

- ∞ The candidate's residency logs and clinical activity logs must be available to the board through Podiatry Residency Resource (PRR). If the candidate's program has not signed on to PRR the candidate is responsible for logging their residency activity in that system. The logs must list all clinical cases the candidate participated in or performed during residency training and must be verified or signed by the residency director.
- ∞ Any portion of the case log not maintained on Podiatry Residency Resource prior to July 1, 2002 must be submitted in hard copy or electronic copy. This copy must be in the same format as the JRRC 652 or 662 reporting requirements. Board Qualified letters will not be released until the complete validated case and activity logs are received and approved by the ABPOPPM. The logs must provide sufficient documentation to the ABPOPPM that the candidate has participated in clinical activities in adequate diversity and volume. Insufficient documentation of adequate diversity and volume of clinical activity while in residency training can result in denial of admission to the examination process.
- ∞ Candidates who meet these requirements, who pass the written exam and who provide evidence of an active license to practice podiatry will be granted board qualified status.

Note: effective in 2007 PM&S-36 candidates only, **who meet all requirements may sit directly for the certification examination.**

Duration of Board Qualified Status

Candidates who pass the qualification (written) examination are granted board qualified status for a period of 5 years. Candidates who fail to achieve certification by their fifth year will relinquish their board qualified status. In specific circumstances an individual's board qualified status may be extended by, e.g. returning to a CPME-approved residency training program after board qualified status has been achieved. Non-CPME-approved postgraduate training is subject to approval by the Certification Committee. In such circumstances, Board Qualified status will be extended by one year for every documented year of approved training.

BOARD CERTIFICATION

To Achieve Board Certification candidates must:

- ∞ Have completed (or be scheduled to complete by July of the examination year) a CPME-approved PPMR, POR, or PM&S training sequence and
- ∞ Provide documentation of a minimum of 42 months* of clinical experience and/or education inclusive of residency training.

*Note: PM&S-36 candidates completing residency in 2007 who apply while in residency are not required to meet the 42 month minimum clinical experience requirement for admission to the certification examination. These candidates however, must take the advanced external assessment examination given by the Board prior to being admitted to the certification examination.

- ∞ Successfully pass the case documentation process, which is a pre-requisite for sitting for the oral examination.
- ∞ Pass both the written and oral examinations.
- ∞ Board certification is for a 10-year period of time. All Diplomates holding such time-limited certificates must re-certify no later than the 10th year since their prior certification.

Note 1: Board Qualified status will be conferred upon candidates who sit for full certification but who successfully pass only one section, i.e. the written or oral/practical portion of the examination. The duration of board qualified status achieved in this fashion will not exceed three (3) years or until the time in which the candidate has exhausted their retake options for the portion of the certification examination failed.

Note 2: After 2007, all candidates for certification must have two (2) years of CPME-approved postgraduate training as described above to be eligible for the certification examination.

Categories of Membership

There shall be five (5) categories of members: Diplomate, Board Qualified, Retired, Founder or Emeritus. The definitions of each membership category are as follows:

A. Diplomate: a podiatrist who:

1. has graduated from a College of Podiatric Medicine approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association, and
2. holds a current license granted by a state, district or other U.S. or international governmental jurisdiction, and
3. has successfully completed the requirements of the board certification examination

B. Board Qualified: a podiatrist who:

1. has graduated from a College of Podiatric Medicine approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association, and
2. holds a current license granted by a state, district or other U.S. or international governmental jurisdiction, and
3. has successfully completed the requirements of the board qualification examination

Note: Candidates for the board qualification examination or, in the case of PM&S-36 candidates applying directly from residency for the board certification examination, may take the examination prior to their obtaining licensure as indicated in #2. They will not be granted Board Qualified or Diplomate status, however, until licensure is obtained.

C. Retired: An active member in good standing having attained the age of 65 years and having completely retired from practice.

D. Founder: A member of the founders groups of the following organizations, as specified in the original petitions for recognition by the Council on Podiatric Medical Education:

1. American Board of Podiatric Orthopedics
2. American Board of Primary Podiatric Medicine
3. Association of Residency Directors of Primary Podiatric Medicine

E. Emeritus: An active member in good standing for 15 consecutive years, having attained the age of 65 years, or an active member in good standing for 25 consecutive years.

Examinations

Notice

Notice of the annual examination shall be given in the APMA News and other publications at least six months in advance of such examination date. Such notice shall provide information regarding the time, place, and date that is fixed by the Board of Directors for such examination.

Content

Any examination for Certification or Board Qualified status shall be comprehensive and may include a broad scope of questions on appropriate area of primary podiatric medicine and podiatric orthopedics. Subject areas may include:

Biomechanics / Pathomechanics / Orthotics / Prosthetics
General Orthopedics
Podorthics
Rehabilitation / Physical Therapy
Surgical Criteria
Trauma / Sports Medicine
Cardiology / Pulmonology
Dermatology
Emergencies
Endocrinology
Hematology / Oncology
Gastroenterology / Nephrology
Infectious Disease
Peripheral Vascular Disease
Psychosocial / Public Health (includes biostatistics, community health and epidemiology)
Neurology
Rheumatology
Wound Care

Results

Examination results will be transmitted in writing to each candidate to the address indicated on the candidate's application form or to any change of address presented to board headquarters by the candidate, in writing.

Re-examination

The Board of Directors, in determining the requirements and qualifications for the re-examination of any candidate who fails the Board certification examination and holds Board Qualified status by either: a) having sat for the full certification examination (written and oral concurrently) and passed only one section of the examination, or, b) having previously achieved Board Qualified status via successfully passing the written examination only, has deemed the following: The candidate must retake only that portion of the examination failed according to the exam retake option. The retake option grants two retake attempts of the failed examination, which must be used within a three-year period of time. The first retake may be taken either the first or second year following the failed examination. The second retake exam, if necessary, must be completed no later than the third year following the initial failure. If a candidate is unsuccessful in achieving Diplomate status by the final re-examination then their Board Qualified status will lapse and they will be required to re-apply for full certification under regulations in effect that time.

Re-evaluation of Diplomates

All active Diplomates must meet the re-evaluation requirement, including Founders and Emeritus, with the following exceptions:

- ∞ Diplomates who have already attained 60 years of age (including Founders and Emeritus) by 2006 remain exempt from the 10-year re-credentialing requirement
- ∞ Diplomates who are Retired are exempt from the requirement
- ∞ Diplomates who can document permanent disability from the ability to practice the profession of podiatry are exempt from the re-evaluative process.
- ∞ Diplomates who are disabled or are inactive may have the re-evaluation requirement extended based upon appeal to the Board of Directors.

Beginning in 2007 self-assessment is required of active Diplomates, regardless of age, who hold lifetime certificates and who are in the 10th year of their re-credentialing cycle.

Diplomates who will become 60 years of age in either 2007 or 2008, holding time-limited certificates and who are in the tenth year of their re-credentialing cycle are being allowed additional time (through the 2009 re-credentialing cycle) for case preparation due to their prior expectation of attaining the 60 year of age re-credentialing waiver. As with all Diplomates holding time-limited certificates, the Board advises that re-certification be attempted before the final year (2009) of eligibility for individuals given the extension as well as those who were previously certified or re-certified in 1999.

Categories For Re-evaluation

A. Mandatory Re-certification

Certificates issued by the ABPOPPM in 1994 and thereafter are time limited and are valid for 10 years only. A Diplomat who fails to complete the re-certification process prescribed by the Board of Directors by the tenth year following their prior certification is no longer considered a Diplomat of the Board.

B. Voluntary Re-certification

Diplomates holding lifetime certificates (certificates issued prior to 1994) are not required to re-certify, however may voluntarily re-certify. Voluntary re-certification will satisfy the re-evaluation requirement and can be substituted for the Self-assessment examination. Lifetime certificate holders who voluntarily re-certify retain their right to meet a future re-evaluation requirement through the Self-assessment Examination and are not obligated to re-certify.

C. Self-assessment

Diplomates holding lifetime certificates (certificates issued prior to 1994) are required to take a self-assessment examination every 10 years from the year of initial self-assessment. Voluntary re-certification will satisfy the re-evaluation requirement and can be substituted for the self-assessment examination.

The following guidelines pertain to the method in which the Board treats Diplomates with regard to the re-evaluation process:

1. Diplomates holding a lifetime certificate are required to complete a re-evaluative process through either voluntary re-certification or the self-assessment examination every 10 years.
2. Diplomates previously holding a lifetime certificate in podiatric orthopedics and a time-limited certificate in primary podiatric medicine are given credit for having voluntarily re-certified effective the date they became certified in primary podiatric medicine. They must meet the re-evaluation requirement as set forth above.
3. Diplomates previously holding time-limited certificates in both primary podiatric medicine and podiatric orthopedics are given an additional 10-year credit for having previously certified in the second specialty. Their mandatory re-certification date will therefore be 20 years from the date they received their initial certification. Thereafter they must meet the re-evaluation requirement as set forth above.
4. Diplomates holding time-limited certificates must re-certify 10 years from the date they received the first certification, and every ten years thereafter.
5. Diplomates holding a lifetime certificate in podiatric orthopedics that had either:
 - a. passed Case Documentation Review in primary podiatric medicine or
 - b. achieved Board Qualified status in primary podiatric medicine inclusive of the Case Documentation Review process (i.e. took the certification exam but failed the written portion) have been given credit for having voluntarily re-certified effective the date they achieved either a. or b.
6. Diplomates holding a lifetime certificate in podiatric orthopedics who achieved Board Qualified status in primary podiatric medicine by passing the written examination only have been given credit for having self-assessed effective the date they achieved Board Qualified status. They must meet the re-evaluation requirement as set forth above.

Note: The Board of Directors does not penalize Diplomates who elect to complete the re-evaluation requirement early. For example, a Diplomat who self-assessed or re-certified the eighth year following their prior credentialing (or recredentialing) would then be required to be re-evaluated twelve years later rather than ten.

Diplomate Certificates

A suitable certificate bearing the seal of the ABOPPPM shall be inscribed for each candidate who satisfies the requirements for certification. Such candidate shall be certified as a "Diplomat" of the American Board of Podiatric Orthopedics and Primary Podiatric Medicine. The certificate shall remain the property of the Board and shall be returned to the Board if for any reason the certified status of the member has been revoked.

Advertising Board Status

A podiatrist who is a Diplomate of the ABPOPPM must adhere to the following guidelines when advertising status (only the following statements of Diplomate status are acceptable):

1. Diplomate, American Board of Podiatric Orthopedics and Primary Podiatric Medicine
2. Board Certified, American Board of Podiatric Orthopedics and Primary Podiatric Medicine
3. Certified American Board of Podiatric Orthopedics and Primary Podiatric Medicine

Note: The organization initials (ABPOPPM) may be substituted for the full name.

Note: The advertising of Board Qualified status is prohibited.

Revocation

The Board of Directors shall have the authority to revoke any certificate of Diplomate status, or revoke Board Qualified status for any member for the following reasons:

- A. If the member has failed to pay the annual registration fee plus any late fee by the date indicated on the final notice.
- B. If the member is convicted of any offense which causes his/her license to practice podiatry to be revoked in any state.
- C. If the member misrepresents facts or provides false information in connection with the application for certification or other related documents.
- D. Failure of a Diplomate to adhere to the requirements for re-evaluation as set forth in the “Re-Evaluation of Diplomates” section of this document.
- E. If the member fails to adhere to the advertising guidelines as outlined in these policies.
- F. Non-adherence to the Code of Ethics as adopted by the Board of Directors.

Items A, B, C and D are cause for automatic revocation of status. Items E and F are subject to revocation following a hearing.

Hearing

Prior to revocation of an individual’s status, that individual shall receive written notice of the charges. He or she shall be entitled to a hearing before the Board of Directors and may be represented by counsel. Thirty days written notice of the hearing shall be given to the individual by registered or certified mail to their last known address. The hearing shall be held at the annual meeting of the Board, or at a special meeting called for that purpose. The decision of the Board of Directors shall be final unless within 30 days from the date of notification of that decision, by certified mail, return receipt requested, a written request for approval is made by the respondent to the Secretary of the Board for a rehearing before the Diplomates of the Board. Such rehearing shall take place at the next annual meeting of the Board. At that time, the proposed revocation may be decided by a majority vote of those Diplomates present and voting. The decision thus rendered by the Diplomates of the Board shall be final.

Reinstatement

The Board of Directors has the responsibility to determine when or if evidence is sufficient to warrant reinstatement of a Diplomate or Board Qualified member and whether such reinstatement may require additional fees, examination or other evaluation of the applicant's professional competency. Such fees, examination or other evaluation will be equivalent to the requirements for the current certification or board qualified examination as is appropriate to the member's status at the time of revocation.

Appeals and Complaints

The Board of Directors has several standing committees that deal with appeals or complaint issues from the membership, consisting of the: Executive Committee; Credentials Committee; Examination Committee; Re-certification / Re-Credentialing Committee

Upon receipt of a formal appeal or complaint by a member the following measures are taken:

- a. Headquarters determines the nature of the complaint or appeal and assigns it to the appropriate committee.
- b. The staff or Executive Director obtains sufficient background information from the member and from the member's file and summarizes the nature of the problem for the respective committee.
- c. The summarization, along with the primary communication from the member and relevant documentation from the member's file is forwarded to the committee members for review.
- d. If the committee has standing conference calls the documentation is included with any other appeals or complaints that fall between conference calls and forwarded to the committee members in advance of the call.
- e. If the committee does not convene on a regularly scheduled basis the documentation is provided in advance to the committee members and a special conference call is scheduled.
- f. A determination is made by the committee according to set policies as described in this policy manual. If the issue lies outside specific written policy, a determination made during the committee meeting is rendered and communicated by headquarters staff to the member.
- g. The committee may, at its discretion, refer the issue to the Executive Committee prior to rendering a final opinion.