



Podiatric Physicians and Surgeons: Their Role in Continuous, Comprehensive and Coordinated Healthcare

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Editorial

It is time to re-emphasize that in addition to providing podiatric medical and surgical care, the podiatric physician is a member of the health care team. This means that podiatric medicine is one of the components of the provision of integrated and comprehensive, continuous total health care, a role that far exceeds solely focusing on the pedal extremity. First, podiatric physicians have the responsibility of being an important member of the health care team, a participant in assuring the provision of comprehensive, coordinated and continuous care. Because of the nature of so many podiatric medical conditions, patients frequently receive care from the podiatric physician more frequently than they do from their primary care provider. Therefore it is imperative that when a patient visits the podiatric physician that in addition to an examination that focuses on the foot and ankle, that in order to participate as a practitioner who is part of the continuum of health care, certain other examinations are both essential and appropriate. At a minimum this should routinely include blood pressure determination and performing a finger stick to assess the blood sugar level of patients (i.e., hemoglobin A1C). In addition, while virtually every podiatric patient has their pedal pulses evaluated for peripheral circulation, the assessment of pedal pulses also may provide information about the cardiovascular status of patients. The American Diabetes Association advocates that dentists do finger stick blood sugar assessment as does the Centers for Disease Control and Prevention (CDC), not only emphasizing that certain dental conditions have an association with cardiovascular disease but also indicating that diabetes screening can be done by dentists [1-3]. However, not enough has been done to identify the broader role of podiatric physicians in the total context of health care. Podiatric physicians well know that foot disorders including lower limb amputation are among the main complications of diabetes. However, the podiatric medical office may also be a useful setting in which to identify individuals with undiagnosed diabetes or hypertension. This is especially important as the population continues to age and the incidence of diabetes continues to rise, exacerbated by a concomitant number of undiagnosed patients. Podiatric professionals can and should be important participants in the collaborative approach to diabetes management. They also may be able to identify people with undiagnosed diabetes and hypertension by routine screening and referring them to their primary health care provider for further diagnostic assessment and management. This would also serve make the primary care physician more knowledgeable about the broad role of podiatric physicians in the care of patients, a fact that is too often overlooked [4]. These relatively simple but important screening examinations are especially essential in podiatric patients who are being considered for surgical care since the stress of the procedure can exacerbate a patient's diabetic state as well as their status as a hypertensive even if undiagnosed [5]. Furthermore, if patients with undiagnosed diabetes or hypertension are identified as a routine part of patient assessment or before they have outpatient or inpatient surgery and are referred to their primary care physician with such findings for evaluation, recognition of the podiatric physician being a health care provider is assured as an essential component of the delivery of continuous, comprehensive, and coordinated health care [6].

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Received Date: 07 Mar 2016

Accepted Date: 20 Apr 2017

Published Date: 11 Oct 2017

Citation:

Levy LA. Podiatric Physicians and Surgeons: Their Role in Continuous, Comprehensive and Coordinated Healthcare. *Clin Surg*. 2017; 2: 1668.

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