

# Future Star: Krupa Patel, DPM

This young practitioner reflects well  
on the profession.

BY MARC HASPEL, DPM



*Editor's Note: This is the first in a series of portraits of some of podiatry's "rising stars." Do you know of a podiatric future star (A 2008 or later graduate)? If so, please send an e-mail to [bblock@podiatrym.com](mailto:bblock@podiatrym.com) nominating a young practitioner and detailing why we should feature him/her.*

**T**he lifeblood of any industry, let alone profession, is the new emerging talent. Certainly, podiatric medicine is no exception. With nine colleges of podiatric medicine and post-graduate residency programs thriving in every state, each year there is a bumper crop of new

she was a recipient of the NYCPCP Scholarship, the Andrew Harris Kooper Award, the JT Tai Scholarship, the Michael J. Valleta Award, and the ABMPS Diabetic Foot Wound Care Award. She was also an APMA National Scholar, a member of the Pi Delta National Honor Society, and third-place winner of the NYCPCP Intercollegiate Symposium.

After graduating in 2008, Dr. Patel started her residency at Morristown Memorial Hospital in Morristown, NJ, a PM&S program with rear foot reconstruction training. By the end of her residency, she had performed over 1,500 foot and ankle

and surgical procedures for bunions, culminated in two posters and the co-authoring of an article in the medical journal *Clinics in Podiatric Medicine and Surgery*. Research is an ongoing passion of hers, and she is actively involved in authoring articles for upcoming journal editions.

Politically involved, Dr. Patel is the President-Elect of the New Jersey Podiatric Medical Society, serves on numerous state-wide committees and has already served four terms as delegate to the APMA House of Delegates from New Jersey.

Dr. Patel recently sat down to answer some questions regarding her young career in podiatric medicine.

**"I had no idea that the education and training was so extensive, and that a podiatric physician was truly the leading expert in foot and ankle pathologies."**

**PM:** What first attracted you to a career in podiatric medicine?

**Patel:** I was first introduced to podiatric medicine when I attended an open house at NYCPCP. I knew of the profession because of visits to my own podiatrist to create orthotics when I was a child, but I also saw that many things had changed within the field. When I was re-introduced to the profession, I loved the notion that I would be trained in both conservative and surgical treatments. I had no idea that the education and training was so extensive, and that a podiatric physician was truly the leading expert in foot and ankle pathologies.

young practitioners who are out in the field, successful and making a difference. These are the rising stars of the profession and *Podiatry Management Magazine* is proud to introduce a new series spotlighting these new stars. Up first is Dr. Krupa Patel of New Jersey.

Dr. Patel received her Bachelor's degree in Biochemistry from New York University. She attended the New York College of Podiatric Medicine and graduated at the top of her class in 2008. While at NYCPCP,

surgeries and completed rotations in virtually every department from pathology to internal medicine. In her third year, Dr. Patel became the Chief Resident of Podiatric Surgery, where she managed a team of five residents, organizing all their daily schedules, including surgical cases and call day assignments. In addition to all her duties as Chief Resident, Dr. Patel also managed to fit in research projects.

Her research, which focused primarily on diabetic foot wounds

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Dr. Patel (from page 121)

**PM:** *Who in podiatric medicine influenced you the most thus far in your career? To whom else do you give thanks?*

**Patel:** Although this is a very tough question, if I had to narrow it down to one person, it would have to be former APMA President Dr. Christian Robertozzi. I first met Dr Robertozzi when I was a resident at Morristown Medical Center. We rotated through Newton Hospital, where he was the chair of the department. He was the first person to really teach me the importance of involvement and advocacy for the profession. He also was very adamant that as residents, we become well-rounded individuals, so that we could succeed in private practice as well as in life. He would hold monthly book clubs where we discussed books such as “7 Healthy

Habits of Highly Effective People” or “How to Win Friends and Influence People”. He would also offer practice management tips, and gave us an early insight into how he ran a successful practice in New Jersey.

the APMA. He was definitely the most influential role model in my career.

I would also give thanks to all the attending physicians who were involved in training residents at the Morristown Medical Center, Overlook

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**“Despite the strong work that the APMA does for the profession as a whole, I think there exists a disconnect between younger practitioners and the organization.”**

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In addition, Dr. Robertozzi was a prime example of what the leadership of our profession should look like. He was very involved at the hospital, and later even became the President of the Medical Staff at Newton Medical Center, as well as being a past president of NJPMS and

Medical Center, Rahway Hospital and the many surgery centers we rotated through. Every single person took time out of their schedule to train residents, and teach us not only how to do surgery, but also how to be better clinicians.

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## PM'S FUTURE STARS

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*Dr. Patel (from page 122)*

**PM:** *What are your goals both short-term and long-term for your career in podiatric medicine?*

**Patel:** Thankfully, many of my short-term goals for my career in podiatric medicine have been met. I am a partner at a successful practice, currently perform a high volume of surgery with residents, and have been fortunate enough to be involved with NJPMS where I will be serving as President in 2018. I have also been an active member of the APMA House of Delegates for the last four years. For my long term goals, I would like to be more active in my local hospital by serving in a leadership role as well as being more involved in our surgical organizations.

**PM:** *What are your thoughts about APMA, the certifying boards, and other organizations that function within the profession?*

**Patel:** I think the APMA has done a solid job at raising awareness in the public arena regarding how podiatric physicians fit into the healthcare team. The organization advocates both on a state and federal level, which is imperative, especially given increased roadblocks that many healthcare professionals are facing, and which make it difficult to provide high quality efficient care to patients in need. Yet, despite the strong work that the APMA does for the profession as a whole, I think there exists a disconnect between younger practitioners and the organization. After three-year intensive surgical residencies, I see many of my counterparts gravitate towards surgical organizations and completely forego joining component state societies and the APMA. I think there has to be a way to better juxtapose the two groups as there is always strength in numbers, and any division within our profession, I believe, will only weaken our resolve.

**PM:** *What sub-specialties interest you in podiatric medicine, and why?*

**Patel:** I am particularly interested in advancing surgical techniques as well as reconstruction of the foot and ankle. I enjoy being in the operating room, and training residents, as well as using many techniques that I learned during my surgical training to fix complicated foot and ankle pathologies.

**PM:** *What type of practice arrangement, i.e., solo, small, or large group, suits you the best?*

**Patel:** I currently practice in a small group with three podiatric physicians. I find this suits me the

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*Dr. Patel (from page 123)*

best because it allows me the flexibility of creating a schedule that gives me some semblance of a work/life balance.

**PM:** *Where do you see your career being in ten years, twenty years?*

**Patel:** In ten years, I hope to expand my practice into a larger group with centralized billing, purchasing, and a streamlined management system. I would love to be the managing partner at a large group as I find that I have been successful at my current practice in creating systems that work well and ensure the highest return with the lowest possible expenditure. In twenty years, I hope to be working closely with residents in a director or assistant director role at a residency program.

**PM:** *What are your thoughts on the overall role of podiatric medicine in the current healthcare system?*

**Patel:** Podiatric physicians are an invaluable part of the healthcare team. With advancements in education and training, these physicians are the experts, who pre-

vent, diagnose, and treat foot and ankle problems. This is especially true with the diabetic population as it has been shown that amputation risk as well as risk for hospitalization significantly decrease with regular visits to podiatric physicians. Many podiatric physicians are at the frontline of limb salvage, wound care, and reconstruction for the highest risk population of patients that are seen. Podiatric physicians are an integral part of the multidisciplinary team that can help keep patients ambulatory.

**PM:** *What should this profession do to continue to attract quality individuals like yourself?*

**Patel:** There are many things that this profession is doing right now that continue to attract quality individ-

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## “Podiatric physicians are an invaluable part of the healthcare team.”

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uals to the colleges, including social media campaigns, open houses at undergraduate schools, as well as staying active on popular forums such as studentdoctor.net. Mentorship opportunities are especially important for prospective students, and it would be beneficial to have younger members open up their offices to students to shadow in order to truly see what today's podiatric physician does.

**PM:** *Would you be in favor of a degree change as well as name change from the term “podiatric” to “foot and ankle” medicine?*

**Patel:** This is a tough question. I am in favor of the ABPS changing their name to ABFAS as this is a much clearer way to describe our surgical certifying board. I am, however, not in favor of a degree change from Doctor of Podiatric Medicine to Doctor of Foot and Ankle medicine. Unfortunately, the name change of our degree would simply be semantics. I do not believe that it would bring the profession any closer to parity with its MD/DO colleagues. I certainly do not see a name change of the degree helping our profession to get equal or on par insurance reimbursement when compared with foot and ankle orthopedic medical doctors, per se. I think we should concentrate our energy on public awareness of what podiatric foot and ankle physician/surgeons do, and how their training is structured ..... to ensure that podiatric physicians remain the leading healthcare professionals to turn to for treatment of all foot and ankle pathologies. **PM**



**Dr. Haspel** is senior editor of this magazine and past-president of the New Jersey Podiatric Medical Society. He is a member of the American Academy of Podiatric Practice Management.