## Future Star: Elizabeth Piselli, DPM

She succeeds in managing that always-elusive work/life balance.

BY MARC HASPEL, DPM



t's always interesting to see how a medical career choice can impact a doctor's favorite activities. An enlightening example is the next nominee in *Podiatry Management's* series on Future Stars in Podiatric Medicine, Elizabeth Piselli, DPM. A former collegiate and U-19 World Cup lacrosse player, Dr. Piselli was nominated for the series by Jennifer Spector, DPM, President of the American Association of Women Podiatrists.

Following suit, Dr. Piselli is now an official podiatrist for the New York Lizards Major League Lacrosse team. Moreover, her research on the incidence of lower extremity injuries in female lacrosse players has been presented as a poster at ACFAS and is undergoing peer review for potential publication.

In addition, Dr. Piselli, a 2012 graduate of the New York College of Podiatric Medicine, who currently practices in Southampton, New York, serves as co-vice president of the AAWP, and is spearheading multiple projects related to student, resident, and new practitioner engagement. Dr. Piselli recently took some time to answer questions regarding her young career and the future of her chosen field.

**PM:** Who in podiatric medicine influenced you the most thus far in

your career? To whom else do you give thanks?

**Piselli:** I would have to say my residency director Dr. Walter. The sort of preparedness and level of performance that he expected for every case and patient are what made me a better surgeon and doctor. I do

**Piselli:** I was influenced by my own podiatrist, Dr. Phil Palmeri. I shadowed him, and his associates, for several summers during college. I really liked that podiatric medicine is a surgical specialty but that there are all sorts of patients and cases. In not many other fields might a doctor treat a dermatological patient, an or-

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have a lot of people to thank: my co-chiefs from residency have been hugely influential in my career. They provided a great support system and are people I can, and do, rely on for help (Drs. Sari Priesand, Keith Bortniker and Crystal Hsu). I also have to thank Dr. Elisabeth Elsinger as a role model for me. She was someone who showed me that you can have a successful academic career while also being a mother you want to be. Then, of course, Dr. Karen Langone has brought me back into the biomechanical world, and reminded me that you can be a good doctor while still running a successful practice.

**PM:** What first attracted you to a career as a DPM?

thopedic patient, a geriatric patient, and a pediatric patient...all in the same morning.

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

**Piselli:** My short-term goals are to become board certified in surgery, whereas my long-term goal is to own my own practice.

**PM:** What podiatry college did you attend? Where was and how would you describe your post-graduate training?

**Piselli:** I graduated from the New *Continued on page 122* 

Dr. Piselli (from page 121)

York College of Podiatric Medicine. I would describe it as an effective and invaluable clinical experience. I had some pretty amazing instructors there but one of my favorites was Dr. Mark Kosinski who brought a sense of humor to the clinic, which made difficult situations easier to bear. I found that some of the patients who were seen were in upsetting situations, and sometimes being able to laugh was the best way to handle that.

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

**Piselli:** I feel that each of the certifying boards serves a purpose. I am

working with others is a great forum for bouncing treatment ideas off each other. I know that there are those cases where doctors are unsure of what to do next. It's nice to have a do to continue to attract sound quality individuals like yourself?

**Piselli:** I think there needs to be more community outreach, as un-

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second set of eyes on something in those cases.

**PM:** Where do you see your career being in 10 years, 20 years?

**Piselli:** I hope to own or at least be a part owner of a practice in ten years, with full ownership in twenty,

comfortable as that can be. A lot of the population is not well informed about the profession and the problems that are treated. It was from seeing a podiatrist that I became interested in the field. It was my athletic career that cemented it as the right choice. Also, I think more outreach to colleges and universities by the podiatric schools would help.

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

**Piselli:** Actually, I wouldn't be against it; as far as I am concerned, I am still treating the whole patient.

**PM:** Lastly, in raising a young family, how are you managing a busy work life balance?

Piselli: I have two children under two years of age, so the balance is challenging at times. I am lucky to be able to work part time (two days in the office and one to two surgical days per month). We all know it takes a village to raise children. I'm grateful to my husband for picking up a lot of the slack on the work side, and to my mother and mother-in-law who help with the life side. PM

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a huge proponent of the organizations that function within the profession. Personally, I am involved with the AAWP, which is doing great things for podiatry.

**PM:** What sub-specialties interest you in this profession, and why?

**Piselli:** I find sports medicine to be fascinating for obvious reasons, as once upon a time I was a serious athlete. Nothing thrills me more, however, than an incision and drainage of an abscess.

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

**Piselli:** I think a small group suits me best. I don't think I would do well in a solo practice as the few times my colleagues have been away and I've been left alone, I ended up talking to myself. Also, I find that

having an associate system where associate doctors feel that they can not only treat the patients well but find mentorship.

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

Piselli: I think podiatric physicians are important gatekeepers of medicine. I find that sometimes with very sick patients, I am the first doctor they have seen in a long time simply because of the urgency of their pedal problems. Sometimes, that may be just because a family member noticed severely elongated nails. Also, I am certain that sometimes I am the only person in an elderly patient's team of doctors who takes the time to explain the nature of certain medical issues to them, including diabetes.

PM: What should this profession



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