Future Star in Podiatric Medicine, Nishu Vora, DPM

The diversity of treatments options makes podiatry attractive.

BY MARC HASPEL, DPM

ew talent is often recognized in the earliest of stages. Such is the case for the next candidate in *Podiatry Management* Magazine's series on "Future Stars in Podiatric Medicine", Nishu Vora, DPM. Nominated by Steven Spinner, DPM, of Florida, where he is currently in Fellowship, Dr. Vora has already opened eyes regarding to where I am. Obviously my parents, and my fiancée for putting up with everything. I thank all our professors and attendings at CSPM, as well as my classmates, Dr. Oloff and Dr. Vartivarian, and all our attendings through residency at Bay Area Foot Care and Palo Alto Medical Foundation and Highland Hospital and St. Mary's and Kaiser Bay Area. Also, I must include Dr. Windram and Dr.

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his ability and future potential in the profession. Though technically still in training as of the writing of this feature, Dr. Vora recently took some time to offer his perspective on his career, ongoing issues facing the profession, and his outlook on the future.

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

Vora: There are way too many people to thank who have gotten me

Spinner, and my fellowship attendings at Westside and Holy Cross. It truly does take a village and I appreciate all of their commitment. I did end up joining the faculty for the podiatric residency and fellowship at Westside Hospital.

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

Vora: Medicine has always been my career choice, but podiatric medicine was never on my radar until I attended undergrad, where I began shadowing different physicians. The



diversity of the field was the true

allure for me. Being able to reduce some toenails, inject a joint, treat a wound, treat newborn clubfoot, and perform surgery to fuse joints, fix ankle fractures, and transfer tendons amazed me right away. The more I learned of what we can do, the more I was hooked.

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

Vora: In the short-term, I am focused on completing my fellowship, and beginning my career in private practice. Luckily, I am joining a well-established practice, but still have a lot of learning and marketing to do to build my patient load and figure out how to bill correctly. In the long-term, I hope to have a thriving practice with high surgical volume, which I can use to continue publishing research. I also plan to be a part of the Westside residency and fellowship programs and help train our future colleagues as my mentors have done for me.

PM: What College of Podiatric Medicine did you attend? Where and how would you describe your post-graduate training?

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Vora: I attended the California School of Podiatric Medicine in Oakland, CA. I then completed the St. Mary's residency program in San Francisco, CA. I then did a fellowallowing us a large and diverse case load under the tutelage of numerous attendings both in ortho and podiatry. I must give a big thank you to the partnership with the Kaiser Bay Area program where we trained in our third year. My fellowship has

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ship at HCA Westside Hospital in Plantation, FL. I really enjoyed my training through school with the extraordinary professors and busy clinic setting. My residency was a great experience with rigorous and extraordinary training. We worked in many diverse settings, including community hospitals, private practices, and large private institutions, also been a great experience, which I highly recommend to those thinking of doing one. I have been able to hone my skills in working up patients, and in the surgical skills required to efficiently operate on them.

PM: What are your thoughts about APMA, the certifying boards,

and other organizations that function within the profession?

Vora: I have been a part of APMA and ACFAS, and many other podiatric organizations since podiatry school began. Joining our attendings to go to the state capital during the LLC to fight for our right to practice medicine was enlightening. I truly believe these organizations help to uphold and promote the development of our field. In my short career in podiatry, I feel our certifying boards are still figuring out where they stand. In my opinion, the infighting between the ABFAS and ABPM doesn't seem to help promote our field or even help take care of those practicing in our field. I plan to be certified in both boards, but will be committed to working toward a common goal of unifying the two certifying bodies. The convoluted pathway to certification by ABFAS and the simple path-Continued on page 130

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Nishu Vora, DPM (from page 129)

way of the ABPM should be married in some way to create a new path that can certify all those who are capable. This would also provide parity with our orthopedic colleagues.

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

Vora: Trauma and reconstruction have really piqued my interest more and more as time has passed. It all started in residency, which then led me to pursue a fellowship in trauma and reconstructive surgery. The ability to use my skills to fix things that are broken or misaligned is quite satisfying.

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

Vora: I would not be able to work on my own. I would prefer to be in a group practice. ment admissions for infected ulcers soared. Podiatric medicine also plays an important role in foot and ankle trauma. Achilles tendon injuries also have been increasing as people are returning to outdoor activities. The current climate of **PM:** Would you be in favor of a degree change as well as a name change from the term "podiatric" to "foot and ankle" medicine?

Vora: We actually had this same debate while in school when

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healthcare isn't always so inviting to podiatric medicine, but it definitely has come a long way thanks to our mentors. This profession is continuously growing with more schools and more fellowships. The better training we can provide, the greater the role we can play in our healthcare system.

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

Vora: In 10 years, I see myself in a thriving practice with a consistent patient and surgical volume. I hope to be giving back to the field by training residents and fellows and also publishing research. In 20 years, I hope to be doing more of the same and planning my retirement.

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

Vora: As we learned during the COVID-19 pandemic, podiatric medicine plays an important role in healthcare and limb salvage. Patients weren't able to see their podiatrist, and emergency depart**PM:** What should this profession do to continue to attract sound quality individuals like yourself?

Vora: Multiple factors play a role. I think it starts with the admission committees to accept well rounded individuals. Two new schools dilute the pool a bit but can also give the field more weight if the students are trained well. It's also important for practitioners to get into mentorship. Shadowing a podiatrist is what got me into the field, and I think seeing is believing. Getting more mentors and having them attend pre-med programs, or allowing students to shadow them, can open many doors. Once they're students, they should get involved in organizations and committees to help paying it forward.

it was brought to the APMSA. The terms "podiatric physician," "podiatric surgeon," and "foot and ankle surgeon" all fit our scope of practice, but our patients don't really know what exactly we as a profession are capable of doing. The name doesn't matter as much as enlightening the general public on how diverse our field is. I tend to use all of them with my patients to help them understand the multiple facets of our treatment options.

PM: In the event you are raising a young family, how are you managing a busy work/life balance?

Vora: I have to give props to all those who went through medical school and residency with children because that would have been very tough for me. I hope to one day have a family and the work-life balance will become even more important. I plan to work hard so I can take the time off I need to spend with my family and fund my travelling hobby. Luckily, the podiatric profession in itself provides a great work/ life balance. **PM**

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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.

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