

Ultrasound— The Next Podiatry Game-Changer

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Having been in practice for more than four decades, it's safe to say that while podiatric medicine has seen many improvements in diagnostic testing and treatment over the years, the true game-changers have been few and far between. But now, the next game changer is here, and it is not only improving diagnostic capabilities and treatment, it is also a financial investment that can boost the bottom line for every podiatric practice.

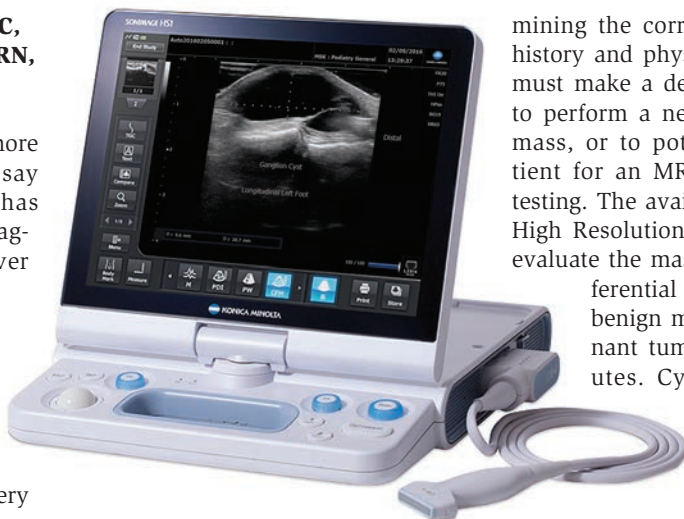
20/20 Imaging, a name synonymous with high quality digital imaging and exceptional service, recently introduced its new ultrasound system, the SONIMAGE HS1. The ultrasound system is an addition to the company's digital imaging portfolio as a result of the 2015 acquisition of 20/20 Imaging by Konica Minolta. While ultrasound is not new to podiatry, this system provides the long awaited and much overdue power-packed combination of exceptional image quality with its high resolution 18 megahertz transducer. Further, 20/20 Imaging provides complete customer support that includes a training package to assure optimal use, all for a reasonable price point affordable for any practice small or large.

High Resolution Yields Superior Diagnostics

Ultrasound enables podiatrists to do a non-invasive evaluation of the patient's body with the added benefit of no radiation. It can be the ideal complement to x-ray because it provides evaluation of soft tissue structures and other non-osseous elements such as muscles, tendons and ligaments. The benefits are vast. The technology increases the accuracy of your diagnosis, treatment is expedited, and patient anxiety is reduced. In a single visit to the podiatrist's office a patient knows exactly what is ailing them, reducing follow-up time and eliminating additional appointments at external imaging centers, such as MRIs. This all, of course, results in an overall reduced cost of care. Here are just a few of the examples of how ultrasound can assist the podiatric physician in determining the correct diagnosis and treatment plan:

Soft Tissue Mass Identification

Currently for podiatrists not using diagnostic ultrasound, soft tissue masses presents a challenge in deter-



mining the correct diagnosis. After a history and physical exam, physicians must make a decision whether or not to perform a needle aspiration of the mass, or to potentially refer the patient for an MRI or other diagnostic testing. The availability of office-based High Resolution Ultrasound (HRU) to evaluate the mass can provide the differential diagnosis of a cyst vs.

benign mass or possible malignant tumor in just a few minutes. Cysts (most commonly ganglions) are easily diagnosed using HRU. At the same time, masses (lipomas, fibromas,

hematomas, neuromas, etc.) can also be diagnosed and differentiated from cystic lesions. Treatments are then adjusted and started just minutes after the diagnosis is made. The decision to aspirate cysts and hematomas, initiate off-loading of fibromas and neuromas, and surgical planning of other tissue masses are made with certainty. Of even more importance, some soft tissue masses may be a malignant tumor. HRU can also assist in diagnosing some of these tumors by utilizing Color Flow Duplex Doppler. Blood flow to a soft tissue mass is an ominous sign that steers physicians to a completely different treatment plan. After using diagnostic ultrasound clinicians will clearly understand that performing blind needle aspirations is risky without knowing what type of lesion it is. In all three cases, diagnostic ultrasound will save time and assist the physician to implement the correct treatment plan.

Needle Placement

Why continue to rely on "what's worked," when you can upgrade to an advanced technology that enables precision? The guesswork of needle placement is now removed with the assistance of diagnostic ultrasound. Patient results are improved tremendously when injections are given directly into the area of inflammation. In plantar fascia injections, the ability to find the exact location of maximal inflammation improves outcome. To be able to see and guide the needle entering the fascial band, then depositing the medication directly where it is needed improves your treatment as a clinician. When it comes to injecting neuromas, the result of injecting directly into the neuroma is superior to injecting into the interspace. As for serial alcohol sclerosing injections of neuromas, it is safer and insures placement. The list of indications for ul-

Ultrasound (continued)

trasound assisted needle placement goes on and on. Most orthopedic surgeons have been successfully using diagnostic ultrasound and ultrasound guided injections for many years now. This is the call for all podiatrists to incorporate high resolution ultrasound into their practices.

Accurate Treatment Plans

Think about the differentiation between posterior tibial tendonitis or a partial tear of the tendon. It is much easier—not to mention more cost-effective—to visualize the tendon with high resolution ultrasound. Is a patient presenting with Achilles tendon pain? With ultrasound you can determine if it is the Achilles tendon or the retrocalcaneal bursa or even the flexor hallucis tendon that is causing the pain. Is there is a tear, inflammation, or nothing at all? The addition of diagnostic ultrasound will enable you to identify the exact soft tissue pathology in your office and get the patient on the right treatment plan from day one.

Maximizing Benefit of an Underutilized Technology

A recent *Podiatry Management* survey found that nearly 60% of practices are not using ultrasound. This safe, non-invasive, proven technology has been used by some podiatrists for over a decade and in medicine in various disciplines for many decades. And with continued improvements in image resolution and tissue penetration, the benefits continue to grow.

So why are some practitioners utilizing high resolution ultrasound and others not? Conversations with colleagues break down the why into three main concerns: 1) Uncertainty of how to use it; 2) Skepticism of the image quality and benefits; and 3) Hesitation to make a financial investment.

The new SONIMAGE HS1 will quickly dispels all these concerns.

Going well beyond the standard manual and documentation, the 20/20 SONIMAGE HS1 ultrasound system is a complete package that comes with a playbook for success, helping to assure that you are able to put it into clinical use from day one. It is supported with tutorial videos, examples of normal and pathologic images along

with ultrasound theory and scanner “buttonology.” Further, there is the availability to work with the assistance of highly experienced podiatrists that really know diagnostic ultrasound. From the ability to image live cases on actual patients, to access to practice management solutions and billing support, a full, end-to-end, full-proof package is available to insure each practice is getting the most from its investment.

While patient satisfaction and better medicine are key to getting the most from your investment, so too is the impact on your bottom line. And with high definition ultrasound, the system should start paying for itself in the very first month. Think about the number of needle placements and other types of cases as described above. Consider that podiatric pathology

is either osseous or soft tissue. Further consider that high resolution ultrasound is dynamic and allows evaluation of movement of structures in real time. Having X-ray and diagnostic ultrasound in your practice provides the ability to evaluate both osseous and soft tissue pathology. Imagine evaluating 30 to 40 soft tissue pathologies a month. This is easily obtained using diagnostic ultrasound.

Moving the Practice of Podiatry Forward

We invest in technologies—like iPhones and high definition televisions—to make our personal lives easier and more productive. So why aren't we doing the same for our business and our patients? It's not every day when the opportunity arises to go from good to great. Incorporating high resolution ultrasound in your practice is that opportunity. For those of us using it, it has made us better podiatric clinicians. We can provide better patient care with less stress. We have increased diagnostic accuracy at reduced cost. We also have the ability to generate additional revenue by conducting reimbursed procedures right in the office setting. This point-of-care service is what makes us better practitioners. It also makes the practice better rather than sending patients and that income out to another facility. Let's make 2016 the year we take a giant step forward for the practice of podiatric medicine with a game changer called diagnostic ultrasound.

For more information visit 2020imaging.net/hs1, call 800-734-6234, or click here.

