Future Star: Ben Cullen, DPM

This young practitioner aims for the ideal work/life balance.

BY MARC HASPEL, DPM



rabbing the bull by the horns is definitely a characteristic worthy of a future star in podiatric medicine. Often, a young podiatric physician arrives on the scene and swiftly takes matters into his or her own hands, emerging as a leader in the profession in little to no time. This is certainly the case of the next nominee for Podiatry Management's series on Future Stars in Podiatric Medicine, Benjamin Cullen, DPM. Nominated by John Chisholm, DPM of California, Doctor Cullen joined the practice of Donald and Richard Green at the San Diego Podiatry Group only four short years ago. In only those few years, Cullen has become president of the San Diego division of the California Podiatric Medical Association, co-director of the San Diego Podiatry Institute Seminar, co-director of the Scripps Mercy Residency Program, and a committee member of APMA and CPMA. In addition, Ben was selected last year to attend the APMA Young Physicians Institute as the California representative.

Doctor Cullen recently sat down to share insight on his young career, accomplishments, and perspectives for the future.

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

Cullen: My biggest influence in podiatric medicine and surgery has been my mentor, Dr. Glenn Weinraub. In my opinion, he is one of the best surgeons in our field, and I am forever grateful for the training he imparted. He demanded nothing short of excellence, and I strive to do that for the residents I am training.

I also give thanks to Dr. Richard Green. He welcomed me into private practice with open arms, and taught me how be a successful business owner. I consider him a second father. career in podiatric medicine?

Cullen: Short-term, I want to continue to balance my efforts on the academic side as an assistant residency director and on the business side as a successful private practitioner. Long-term, I may try to get more involved on the political scene once my kids are out of the house.

PM: Since you mentioned family, how are you managing a busy work/life balance?

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

Cullen: My mother was an anesthesiologist, and while I liked the idea of going into medicine, I also wanted a better work-life balance than she had. That's something I really enjoy about podiatric medicine, along with the nice mix of clinic and surgery, and various specializations that are available.

PM: What are your goals, both short-term and long-term, for your

Cullen: It's not easy. It comes down to the individual decisions on a daily basis. Whenever possible, I prioritize time with family. I go by the mantra that on one's deathbed, no one ever wished that he or she had worked more.

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

Cullen: I graduated from the Cal-Continued on page 161

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Dr. Cullen (from page 160)

ifornia School of Podiatric Medicine in 2010. I did the Kaiser Hayward Residency, now known as Kaiser Santa Clara or South Bay Consortium. I would describe it as a well-rounded, intense program, with excellent faculty.

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

"I do support converting our DPM degree to a plenary license."

Cullen: Honestly, I'm conflicted. The stated purpose of each of these organizations is noble, but there is a lot of controversy within our profession about how well those organizations adhere to their principles. I consider ACFAS as the leading example of the group that best meets its charge.

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

Cullen: I enjoy reconstructive surgery, wound care, and sports medicine. I like surgery because it's very rewarding to give someone a functional limb; wound care because of the importance of limiting complications, and sports medicine because of the motivated patients being treated.

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

Cullen: For now, a small group works very well for me. I like sharing the burden of ownership, as well as being able to bounce around ideas of patient management with professionals I respect.

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

Cullen: Hopefully, I will be doing the same thing I'm doing now. I'm very fortunate to have landed in a sweet spot right out of residency. It's invigorating working with residents, I enjoy the freedom of private practice, and I love where I live.

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

Cullen: I believe that podiatric medicine has come a long way. I feel like I got into the profession at a great time, where current podiatry residents are training alongside their MD/DO counterparts, and podiatric physicians are widely recognized as the foot and ankle experts. I am

very proud of the work podiatric physicians do and consider them to be an essential part of the healthcare system.

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

Cullen: I hope to see limited infighting among our national organizations. Rather, I would like them to continue to advocate for the profession to both the general public and other areas of medicine.

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

Cullen: I would have to say no. I believe that is

what differentiates us from foot and ankle orthopods. On the other hand, I do support converting our DPM degree to a plenary license. **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.