Future Star Christopher Girgis, DPM

He has a clear vision for podiatry's future.

BY MARC HASPEL, DPM



itting the ground running in this profession can quickly cause your colleagues to notice. The ones who start getting it done right from the outset are few and far between. They stand out among the others and are shining examples of Future Stars in Podiatric Medicine by Podiatry Management magazine.

Such is the case with Christopher Girgis, DPM. Nominated by his

with thought leaders and has created a new monthly Podiatry Teaching Conference for its trainees and faculty. Moreover, through his networking, the department's educational programming has expanded in his short tenure.

Dr. Girgis has recently been awarded institutional funding to study cognitive impairment in older adults with diabetes. Additionally, he recently won first-place awards for the **PM:** Who in podiatric medicine influenced you the most thus far in your career? To whom else do you give thanks?

Girgis: I've been fortunate to have incredible influences who have shaped my approach to patient care, education, and research. During my time at Scholl College, I had the privilege of working closely with Dr. Ryan Crews, who helped lay a great research foundation, and great educators in Dr. Dan Evans and Dr. Leland Jaffe, who not only helped me build a strong knowledge base but also greatly influenced my approach to education.

In residency at Loyola University Medical Center,I was influenced by Dr. Frank Rottier, Dr. Edwin Harris, and Dr. Rodney Stuck, whose mentorship played a big role in shaping my approach to clinical and surgical care. Then in fellowship, I had the privilege of being trained by Dr. Larry Lavery, Dr. Andrew Crisologo, and Dr. Paul Kim, who all had a huge impact on my approach to diabetic limb preservation and academic medicine.

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

Girgis: While in college, I shadowed several medical specialties, searching for the right fit. Through a mutual connection, I had the oppor-Continued on page 97

Dr. Girgis has recently received institutional funding to support his research on cognitive impairment in older adults with diabetes.

fellow colleague, Gary Rothenberg, DPM, Dr. Girgis joined the faculty at the University of Michigan Department of Endocrinology (MEND) in July 2023 after completing his fellowship in limb salvage at the University of Texas, Southwestern. He jumped right into leadership roles within the department, taking over the planning of the Annual Diabetic Foot Conference, its podiatry education series, and served on the MEND Faculty Retreat Planning Committee this past year. He recognized the benefit of local, regional, and national interaction poster presentation SAWC meeting in 2024. He has five active approved research projects with colleagues and mentees in the department. Dr. Girgis has also jumped into service for our profession's organizations, including serving as a CPME on-site observer and serves on the American College of Podiatric Medicine's Education Committee.

Known for having knowledge, experience, and a kind demeanor, Dr. Girgis recently took a few moments to discuss his early career and thoughts on his future in podiatric medicine.

PM'S FUTURE STARS

Dr. Girgis (from page 96)

tunity to shadow Dr. Rodney Stuck, a podiatrist at Loyola who was involved in research and education. I really liked the hands-on nature of the profession and the ability to make a tangible difference in patients' lives through both medical and surgical interventions.

ship director, continuing to mentor podiatric physicians, while advancing the field through thoughtful research that supports the continued growth of podiatric medicine.

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

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

Girgis: In the short term, I see myself refining my expertise in wound care and diabetic limb preservation while expanding my role as an educator and researcher. My focus is on developing innovative teaching strategies for medical students, residents, and fellows, along with conducting research to improve diabetic foot ulcer outcomes. Specifically, I am interested in studying the impact of cognitive impairment on diabetic foot ulcer healing, with the goal of developing tailored interventions to improve patient outcomes. Additionally, I plan to pursue a master's degree in public health to enhance public health solutions for this highrisk population. I also aspire to take on a leadership role within a residency or fellowship program, mentoring trainees and contributing to the development of the next generation of podiatrists.

In the long-term, I hope to expand my contributions beyond a single institution and locally, supporting national and international efforts in diabetic limb preservation. I would be honored to take on leadership roles that help shape the field, whether through research initiatives, involvement in professional organizations, or contributing to academic leadership at a podiatric medical school. Ultimately, my goal is to serve as a residency or fellow-

Girgis: I attended Scholl College of Podiatric Medicine. My post-graduate training included a residency at Loyola, which provided a strong foundation in diabetic limb preservation. Given my interest in research and education, I sought further growth in these areas, leading me to pursue fellowship training in diabetic limb salvage and wound care at the University of Texas Southwestern

in solidifying podiatry's place in the healthcare system. This profession has come a long way, thanks to the dedication of those who fought for its recognition and expansion of scope. Podiatrists truly stand on the shoulders of giants, and I am deeply grateful for their efforts.

At the same time, the current structure of certifying boards can be complex, particularly for younger practitioners like me. Greater collaboration and unity among these organizations would help create a clearer, more streamlined certification process, ultimately strengthening the profession and benefiting both practitioners and the patients served.

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

Girgis: I am particularly interested in diabetic limb preservation and wound care. This field offers a unique intersection of medicine and surgery, allowing me to make a real impact through limb preservation efforts. Beyond that, I see significant research opportunities in this area,

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Medical Center under Dr. Larry Lavery. I'm grateful to have trained at large academic centers under great educators who provided me with a strong foundation in both the clinical and surgical aspects of podiatric medicine, particularly in managing complex wounds and high-risk patients.

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

Girgis: Podiatrists owe a great deal to APMA for its continued advocacy, which has been instrumental

which further reinforces my interest. Lastly, diabetic limb complications are a major public health issue, and I believe podiatrists are uniquely suited to address them.

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

Girgis: I thrive in an academic medical center where patient care, education, and research intersect. I enjoy collaborating with colleagues across specialties, training residents and fellows, and contributing to ad-

Dr. Girgis (from page 97)

vancements in the field; these aspects of my practice are especially fulfilling.

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

Girgis: Our role is increasingly vital, particularly for patients with chronic conditions like diabetes. My training and current role at a large tertiary medical center have reinforced the importance of podiatry in preventing complications, reducing hospitalizations, and improving patient outcomes. Podiatry plays a critical role in wound care and limb preservation, and I believe our profession will continue to have a key seat at the table in these areas.

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

Girgis: We need to focus on four key areas: enhancing visibility, pro-

Emphasizing the variety of specializations available will make the profession more appealing to individuals with diverse interests.

Third, ensuring a competitive educational pathway is key to attracting top-tier applicants. We should prioritize quality over quantity in admisdidn't fully understand how the profession was perceived. I often found myself explaining that I was going to school to become a 'foot and ankle surgeon' or 'specialist,' only to be asked if I was an orthopedic surgeon or to be met with confusion. Over time, I've come to appreciate the value in em-

"By increasing shadowing opportunities, improving pre-health advising, and collaborating with other healthcare programs, we can introduce more students to the profession."

sions to podiatric schools. Temporarily reducing class sizes and raising admission standards will help attract stronger applicants and elevate the profession. This approach will position podiatry as a top-tier field, ensuring we are training the best individuals to shape the future of the profession.

Finally, expanding mentorship and early exposure is critical. Many

bracing our identity as podiatrists. It's simpler, clearer, and more authentic. There's pride in that identity

Terms like 'podiatric foot and ankle specialist' or 'podiatric foot and ankle surgeon' reflect our training and expertise, and I think they work well. As we continue to work on increasing visibility, we should be mindful that constant changes in how we refer to ourselves may hinder our efforts to create a cohesive, recognizable identity for the profession.

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

Girgis: One needs to set clear boundaries. I make a conscious effort to be present with my family when I'm home, prioritizing quality time with my kids and wife. I practice a 'no phone policy' when possible and set aside dedicated time for rest and reflection. Although academic medicine is demanding, these boundaries allow me to be fully engaged both as a doctor, and as a father and husband, ultimately making me better in all these roles. PM

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moting diverse opportunities, ensuring a competitive educational pathway, and expanding mentorship and early exposure.

First, enhancing visibility is crucial. Strengthening partnerships with academic institutions and increasing research initiatives will help raise awareness of podiatry. By showcasing the meaningful impact podiatry has on patient care, particularly in areas like limb preservation and diabetic foot care, we can attract individuals who are passionate about making a difference in healthcare.

Second, promoting diverse opportunities within the profession is essential. Podiatry offers a broad spectrum of career paths, from complex foot and ankle surgery to limb preservation, and it's important to highlight this range to prospective students.

pre-med students are unaware of podiatry as a career option. By increasing shadowing opportunities, improving pre-health advising, and collaborating with other healthcare programs, we can introduce more students to the profession. This early exposure will help them recognize podiatry as a viable and rewarding career path.

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

Girgis: No, I wouldn't be in favor of either a degree or name change. I believe APMA has done a good job with the brand 'APMA: advancing foot and ankle medicine and surgery.' However, when I first entered podiatry, I



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.