

Future Star: Priya Parthasarathy, DPM

She has set ambitious goals and intends to accomplish them.

BY MARC HASPEL, DPM



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Sometimes the profession of podiatric medicine is the beneficiary of quality young physicians whose career path was chosen at a very early age. Through personal adversity, for instance, certain individuals come to learn about this profession, and embark on the road to becoming podiatric physicians soon after. Such is the case of the next candidate in *Podiatry Management's* series Future Stars in Podiatric Medicine. Priya Parthasarathy, DPM came across the field of podiatric medicine at an early age in the wake of a surgical complication unfortunately befalling her mother. The care her mother received by foot specialists profoundly influenced her career choice. As a young physician, and already a partner in a super group practice, she plans on playing key leadership roles in the profession. Dr. Parthasarathy shared her thoughts on her career and her perspective on her future in podiatric medicine.

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

Parthasarathy: My residency director, Dr. Marshal Solomon, has influenced me the most. He was always involved in many activities out-

side of our residency program such as APMA and our certifying boards, which I always admired. Former APMA President Dr. Phillip Ward also really encouraged and supported my career aspirations through APMA, especially when I was a young physician liaison of the board of trustees.

He provided guidance and mentorship, and always ensured that my voice was heard.

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

Parthasarathy: My passion for podiatric medicine began when I was in high school. Unfortunately, my mother developed partial paralysis in her right leg after a surgical complication, which resulted in a foot drop. I took a close interest in her recovery and her rehabilitation process. This interest eventually guided my career choice. The progress that my mother made due to the treatments she received from various specialists led me toward pursuing a career in medicine. I was

lucky enough to be accepted in a six-year program that combined my Bachelor of Science at the University of Waterloo, chiropractic and podiatry programs. I originally began in the chiropractic program at The Michener Institute in Toronto, Canada and transferred into the podiatric medi-

cine program at Temple University as part of a joint program.

PM: What are your goals both short-term and long-term for your career as a DPM?

Parthasarathy: My short-term goal is to continue to grow with The Foot and Ankle Specialists of the Mid-Atlantic, become President of Maryland's Podiatric Medical Association, expand my involvement in research, and continue to grow my media presence. In addition, there are some executive training courses associated with MBA programs that I would love to explore one day. I'm always looking for ways to ensure that young podiatrists and residents

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have experiences that prepare them to be well-rounded, empathetic, and rigorous in this profession. I believe that can only happen if all podiatric

to see the two certifying boards work together and collaborate based on the needs of podiatric physicians. They should both be recognized by all hospitals for certifying members to practice. The goal should be to advance the pro-

ference. We also have many experts in our group consult regarding MIPS, billing, and compliance. It's wonderful to be a partner in a group that allows me to have autonomy within the business and helps young physicians build their careers. I think I am exactly where I am supposed to be.

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physicians lead and support this next generation holistically.

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

Parthasarathy: I attended Temple University College of Podiatric Medicine. I went on to complete my residency training at Botsford Hospital in Farmington Hills, Michigan. I definitely picked the right program for me. It was a great mix of all aspects of podiatry. I had the opportunity to be part of surgical mission trips to Honduras, participate in special rotations at Children’s Hospital in D.C., and received training from many talented, kind, and accomplished surgeons. It was also a great environment in which to train; the attendings taught with passion and empathy, and it was a supportive team. I was made comfortable and confident to ask questions. I know this isn’t the case across the board when I share experiences with my colleagues, but I truly wish everyone would have had as positive a residency experience as I did.

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

Parthasarathy: APMA does an excellent job advancing and advocating for this profession. It makes a concerted effort toward keeping up with member needs and policy changes that will affect the profession. I would love

to see the two certifying boards work together and collaborate based on the needs of podiatric physicians. They should both be recognized by all hospitals for certifying members to practice. The goal should be to advance the pro-

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

Parthasarathy: I really enjoy sports medicine, which allows me to treat active adults like myself. I can relate to their needs and can provide guidance with an empathetic approach. Sports medicine also brings

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in a lot of pediatric patients, young athletes who have their whole careers ahead of them. I find this particularly rewarding as a mother.

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

Parthasarathy: I am currently in a large single specialty practice, The Foot and Ankle Specialists of the Mid-Atlantic, and thankfully, it has been my first and only job following residency for the past seven years. The group has grown very large over the years and has become a super group. I enjoy having other podiatric doctors there to discuss cases with and provide second opinions within our own prac-

PM: Where do you see your career in ten years, twenty years?

Parthasarathy: Within ten years I hope to be working my way onto the APMA Board of Trustees, and in twenty years I hope to be working my way to presidency. With regard to my practice, it is difficult to say as the landscape of medicine is changing so rapidly. I do hope to be with my current practice in ten years as an active board member. More importantly, however, I want to continue learning and keeping up with the significant changes that lay ahead.

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

Parthasarathy: There is a great need for podiatric medicine in the healthcare system. This is a unique profession that can handle many aspects of patient foot and ankle care. I have seen many cases where the expertise and deep knowledge of a podiatric physician would have resulted in an improved outcome for the patient. I think the profession needs to continue to educate the public of its importance in the healthcare system.

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

Parthasarathy: Educating students about podiatric medicine is crucial. It

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is essential to educate college and high school students by targeting guidance counselors and career advisors. It is also important for other podiatric physicians to go back to their former educational institutions to speak about

podiatric medicine. Podiatrists ought to make themselves available to mentor through the DPM Mentor network. I cannot count the number of times that students, after they have shadowed me for a day, have told me that they had no idea that podiatric doctors treat so many conditions.

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

Parthasarathy: I am more comfortable describing myself as a foot and ankle doctor because it describes the area of the body that I treat. I would, however, not recommend going as far as to change the degree to foot and ankle medicine. Podiatric medicine is our profession and podiatric medicine is what is practiced.

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

Parthasarathy: This is the million-dollar question. I wish I had a good answer. Sometimes I feel that no matter how organized I am, it is not enough. It is tough trying to be a good mother, wife, and doctor, not to mention all the other hats that I have to wear. I always thought one could have it all, but now I feel that one cannot, especially with a young family. I have learned to say no to things that I just can’t balance well. I know that physician burnout is a real crisis right now. With all the demands that physicians have, it’s important to learn how to prioritize the things that really matter. **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.