

# Podiatrist

## **Professional Activities**

Podiatrists, also known as doctors of podiatric medicine (DPMs), diagnose and treat disorders, diseases, and injuries of the foot and lower leg. The human foot is a complex structure. It contains 26 bones—plus muscles, nerves, ligaments, and blood vessels—and is designed for balance and mobility. The 52 bones in the feet make up about one-fourth of all the bones in the human body.

Podiatrists treat corns, calluses, ingrown toenails, bunions, heel spurs, and arch problems; ankle and foot injuries, deformities, and infections; and foot complaints associated with diseases such as diabetes. To treat these problems, podiatrists prescribe drugs, order physical therapy, set fractures, and perform surgery. They also fit corrective inserts called orthotics, design plaster casts and strappings to correct deformities, and design custom-made shoes. Podiatrists may use a force plate or scanner to help design the orthotics: patients walk across a plate connected to a computer that “reads” their feet, picking up pressure points and weight distribution. From the computer readout, podiatrists order the correct design or recommend another kind of treatment.

To diagnose a foot problem, podiatrists also order x rays and laboratory tests. The foot may be the first area to show signs of serious conditions such as arthritis, diabetes, and heart disease. For example, patients with diabetes are prone to foot ulcers and infections due to poor circulation. Podiatrists consult with and refer patients to other health practitioners when they detect symptoms of these disorders.

Most podiatrists have a solo practice, although more are forming group practices with other podiatrists or health practitioners. Some specialize in surgery, orthopedics, primary care, or public health. Besides these board-certified specialties, podiatrists may practice other specialties, such as sports medicine, pediatrics, dermatology, radiology, geriatrics, or diabetic foot care.

Podiatrists who are in private practice are responsible for running a small business. They may hire employees, order supplies, and keep records, among other tasks. In addition, some educate the community on the benefits of foot care through speaking engagements and advertising.

Podiatrists usually work in their own offices. They also may spend time visiting patients in nursing homes or performing surgery at hospitals or ambulatory surgical centers, but usually have fewer after-hours emergencies than other doctors have. Those with private practices set their own hours, but may work evenings and weekends to accommodate their patients.

## **Educational Requirements**

Podiatrists must be licensed, requiring 3 to 4 years of undergraduate education, the completion of a 4-year podiatric college program, and passing scores on national and State examinations. Prerequisites for admission to a college of podiatric medicine include the completion of at least 90 semester hours of undergraduate study, an acceptable grade point average, and suitable scores on the Medical College Admission Test. All require 8 semester hours each of biology, inorganic chemistry, organic chemistry, and physics, and 6 hours of English. The science courses should be those designed for premedical students. Potential podiatric medical students may also be evaluated on the basis of extracurricular and community activities, personal interviews, and letters of recommendation. More than 95 percent of podiatric students have at least a bachelor's degree.

In 2008, there were eight colleges of podiatric medicine accredited by the Council on Podiatric Medical Education. Colleges of podiatric medicine offer a 4-year program whose core curriculum is similar to that in other schools of medicine. During the first 2 years, students receive classroom instruction in basic sciences, including anatomy, chemistry, pathology, and pharmacology. Third- and fourth-year students have clinical rotations in private practices, hospitals, and clinics. During these rotations, they learn how to take general and podiatric histories, perform routine physical examinations, interpret tests and findings, make diagnoses, and perform therapeutic procedures. Graduates receive the doctor of podiatric medicine (DPM) degree.

Most graduates complete a hospital residency program after receiving a DPM. Residency programs last from 2 to 4 years. Residents receive advanced training in podiatric medicine and surgery and serve clinical rotations in anesthesiology, internal medicine, pathology, radiology, emergency medicine, and orthopedic and general surgery. Residencies lasting more than 1 year provide more extensive training in specialty areas.

All States and the District of Columbia require a license for the practice of podiatric medicine. Each State defines its own licensing requirements, although many States grant reciprocity to podiatrists who are licensed in another State. Applicants for licensure must be graduates of an accredited college of podiatric medicine and must pass written and oral examinations. Some States permit applicants to substitute the examination of the National Board of Podiatric Medical Examiners, given in the second and fourth years of podiatric medical college, for part or all of the written State examination. In general, States require a minimum of 2 years of postgraduate residency training in an approved healthcare institution. For licensure renewal, most States require continuing education.

Podiatrists may advance to become professors at colleges of podiatric medicine, department chiefs of hospitals, or general health administrators.

### **Academic Programs**

[Rosalind Franklin University of Medicine and Science](#)

### **Employment/Salary Outlook**

More people will turn to podiatrists for foot care because of the rising number of injuries sustained by a more active and increasingly older population. Also, demand for podiatrists will increase because of the rising number of Americans who are diagnosed with diabetes and who are severely overweight. People with diabetes have circulatory problems that create the need for them to seek the aid of podiatrists; persons who experience rapid weight gain may have intense pressure on the foot and ankle, and therefore need the services of podiatrists.

Medicare and most private health insurance programs cover acute medical and surgical foot services, as well as diagnostic X rays and leg braces. Details of such coverage vary among plans. However, routine foot care, including the removal of corns and calluses, is not usually covered unless the patient has a systemic condition that has resulted in severe circulatory problems or areas of desensitization in the legs or feet. Like dental services, podiatric care is often discretionary and, therefore, more dependent on disposable income than some other medical services.

## State and National Wages

Location	Pay Period	2021		
		Low	Median	High
United States	Hourly	\$29.94	\$70.11	\$100.00+
	Annual	\$61,350	\$145,840	\$208,000+
Illinois	Hourly	\$23.74	\$61.72	\$100.00+
	Annual	\$49,380	\$128,380	\$208,000+

## State and National Trends

United States	Employment		Percent Change	Job Openings <sup>1</sup>
	2021	2031		
Podiatrists	11,000	11,200	2%	300
Illinois	Employment		Percent Change	Job Openings <sup>1</sup>
	2020	2030		
Podiatrists	660	600	-9%	40

<sup>1</sup>Job Openings refers to the average annual job openings due to growth and net replacement.

## Professional Organizations

American Podiatric Medical Association ([apma.org](http://apma.org))

American Association of Colleges of Podiatric Medicine ([aacpm.org](http://aacpm.org))

## References

Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, Podiatrists (<http://www.bls.gov/ooh/healthcare/podiatrists.htm>)

O\*NET OnLine (<http://online.onetcenter.org/link/summary/29-1081.00>)

Last Modified November 1, 2022