

Patient Hopes & Expectations in Foot and Ankle Surgery

Responsibility for the performance of foot and ankle surgery has become blurred, owing to two inter-related factors: a rise in the number of podiatrists and podiatric surgeons whose work complements that of orthopaedic surgeons, and the reluctance of some General Practitioners to refer patients directly to orthopaedic surgeons. Informed patient choice of appropriate pathways of treatment can be hampered by an inadequate or incomplete range of information for patients and GPs about the relative skills and training of those offering treatment.

The doubts and the confusions created by this situation have done nothing to improve the sometimes unreasonably high patient expectations that can outstrip clinical results, leading to low satisfaction rates compared to certain other specialties. This is especially the case with forefoot surgery.

A valuable source of information about the various conditions and treatments is:

<http://www.bofas.org.uk>

The range of conditions affecting the feet and ankles is varied & the reasons for seeking help vary from toenail cutting & corn management for those who cannot do these themselves to highly complex conditions requiring complex management. It is therefore important for a patient to be fully informed of the more appropriate Specialist option, depending on the condition they are suffering.

From a patient perspective, the kind of surgery undertaken is either because of trauma or as a result of a disease. The basic patient expectations are therefore similar to those of either trauma or elective orthopaedic patients.^{1,2}

- Patients admitted through a trauma unit should expect to be treated in the same way as any other trauma patient¹.
- For other conditions that may need surgery it is reasonable in the current climate for the patient to expect to be referred to an orthopaedic unit.²
- For medical & other non-invasive conditions, referral to a podiatrist may be appropriate provided there is a provision for further referral to the orthopaedic dept or the podiatrist is working under the supervision of a consultant foot and ankle surgeon in order to discuss more higher level management

The BOA Patient Liaison Group is aware of the growing trend for patients to be referred to a podiatrist. The following web site: <http://www.nhscareers.nhs.uk/what-is-a-podiatrist.shtml> highlights the NHS perspective of the role of the podiatrist.

The Patient Liaison Group is concerned that the title of Consultant Podiatric Surgeon may lead to confusion, unless the clinician clearly discusses his qualifications with the patient, especially if surgical procedures are to be undertaken.

The Patient Liaison Group feels that a patient who is being referred for surgical assessment has a **right** to be able to choose if they are going to be treated by as fully qualified Orthopaedic Surgeon or a Podiatric Surgeon.

SUMMARY

Referral:

Every patient referred by a GP for foot surgery must be given an informed choice between a podiatric and an orthopaedic surgeon.

Out-patient appointment:

Each healthcare professional involved in foot and ankle care must make clear their status and qualifications at the beginning of the consultation, especially if they are medical qualified or not, in a manner that is clear to the patient/carer.

Consent:

All non-surgical and surgical options must be discussed, including complications and results. These data must be evidence-based, and explained in such a way that the patient/carer can make a fully informed decision.

Quality assurance of surgery:

The patient has a right to know what quality measures have been put in place by an individual surgeon or unit. For example that an audit of their results and outcomes; recent professional revalidation; validated patient reported outcome measurements are available to see.

Surgery:

A patient should be advised that although forefoot surgical procedures may be performed competently by either a podiatric surgeon or a foot and ankle orthopaedic specialist surgeon, other aspects of foot and ankle surgery, such as hind foot surgery, may best performed by medically qualified orthopaedic surgeons.

A patient has the right to expect that their surgeon has the training and skill to carry out the proposed operation. When the condition needs more specialist attention there should be a seamless transition within the multi-disciplinary team from one specialist to the other.

Structure of teams:

The patient has the right to expect that, like an Orthopaedic Surgeon, a Podiatric Surgeon is a fully integrated member of a multi-disciplinary NHS network.

⁴ Expectations of Trauma Orthopaedic Patients (www.boa.ac.uk)

² Expectations of Elective Orthopaedic Patients (www.boa.ac.uk)