



House of Representatives

General Assembly

File No. 96

February Session, 2024

Substitute House Bill No. 5196

House of Representatives, March 25, 2024

The Committee on Public Health reported through REP. MCCARTHY VAHEY of the 133rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT EXPANDING THE PODIATRIC SCOPE OF PRACTICE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (c) of section 20-54 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective October*
3 *1, 2024*):

4 (c) A licensed podiatrist may independently engage in the surgical
5 treatment of the ankle, including the surgical treatment of the
6 anatomical structures of the ankle, as well as the administration and
7 prescription of drugs incidental thereto, and the surgical treatment of
8 manifestations of systemic diseases as they appear on the ankle, after
9 the podiatrist provides documentation to the Department of Public
10 Health of the following: (1) (A) Graduation on or after June 1, 2006, from
11 a three-year residency program in podiatric medicine and surgery that
12 was accredited by the Council on Podiatric Medical Education, or its
13 successor organization, at the time of graduation, and (B) current board
14 certification or qualification in reconstructive rearfoot ankle surgery by

15 the American Board of Foot and Ankle Surgery, or its successor
 16 organization; or (2) (A) graduation prior to June 1, 2006, from a
 17 residency program in podiatric medicine and surgery that was at least
 18 two years in length and accredited at the time of graduation by said
 19 council, and (B) current board certification or qualification in
 20 reconstructive rearfoot ankle surgery by the American Board of Foot
 21 and Ankle Surgery, or its successor organization. For purposes of this
 22 section, "surgical treatment of the ankle" includes all soft tissue and
 23 osseous procedures, including ankle fracture fixation, ankle fusion,
 24 ankle arthroscopy, insertion or removal of external fixation pins into or
 25 from the tibial diaphysis at or below the level of the myotendinous
 26 junction of the triceps surae, [and] insertion and removal of retrograde
 27 tibiototalcalcaneal intramedullary rods and locking screws up to the
 28 level of the myotendinous junction of the triceps [surae] surae and
 29 forefoot and midfoot amputation, but does not include the surgical
 30 treatment of complications within the tibial diaphysis related to the use
 31 of external fixation pins, the performance of total ankle replacements or
 32 the treatment of tibial pilon fractures.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2024	20-54(c)

PH *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

The bill, which expands the scope of practice of podiatric medicine to allow podiatrists to independently perform forefoot and midfoot amputations, is not anticipated to result in a fiscal impact to the state or municipalities.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis

sHB 5196

AN ACT EXPANDING THE PODIATRIC SCOPE OF PRACTICE.

SUMMARY

This bill expands the scope of practice of podiatric medicine to allow podiatrists to independently perform forefoot and midfoot amputations. To do so, a licensed podiatrist must provide the Department of Public Health (DPH) documentation that they:

1. graduated from a podiatric residency program meeting specified criteria and
2. hold current board certification or qualification in reconstructive rearfoot ankle surgery by the American Board of Foot and Ankle Surgery, or its successor.

Under the bill, the residency program must have been accredited by the Council on Podiatric Medical Education, or its successor, at the time the podiatrist graduated. The program must have been at least (1) two years in length if the person graduated before June 1, 2006, or (2) three years for graduates on or after that date.

Current law already allows podiatrists who meet the above criteria to independently perform certain ankle surgeries, including all soft tissue and osseous procedures (e.g., fixing ankle factures, ankle fusions, and ankle arthroscopy). They cannot perform total ankle replacements, tibial pilon fracture surgeries, or surgeries to treat complications within the tibial diaphysis related to the use of external fixation pins.

EFFECTIVE DATE: October 1, 2024

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 36 Nay 1 (03/11/2024)