

# **Wound Care as a Practice Builder**

*By Peter Paicos, Jr., DPM*



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## Wound Care as a Practice Builder

People often ask me "why wound care?" Of all the possible ways to build a practice, why choose a time consuming, labor-intensive and often uneconomical process when there are so many other professional opportunities? To put it simply, I like it. Just as some people like racecars, some like baseball and others like old fire trucks; I derive enjoyment from wound care.

I developed an interest in wound care about twelve years ago, after visiting Bill Coleman, DPM at the Hansens Disease Center in Carville, LA. At this community hospital on the north shore of Boston, lower extremity limb salvage was an integral part of clinical procedures. The Insensitive Foot Clinic developed a following within the community, and the good healing outcomes that ensued helped to establish a solid patient base. Word of mouth quickly spread the message that amputation is not an option, but a last resort for the resolution of lower extremity pathology. Primary care physicians and endocrinologists in particular began referring patients to the center. In addition to other physicians, visiting Nurses organizations also began sending patients. Soon after, patients began sending other patients, and both the clinic and my practice became very busy.

As the Clinic was limited to care of the foot only, it became evident that the concept had limitations. As a practicing podiatric physician in Massachusetts, I could only treat problems that were below the ankle. Referrals would come from frustrated primary care physicians whose patients had non-healing wounds above the ankle. This population needed to be included for comprehensive wound care.

I contacted a representative from the Curative Corporation, nine years ago, in an attempt to find a solution that would meet the health care needs of a larger population. I remember the first meeting like it was yesterday. "But you are just a Podiatrist". My inquiries were shut down with that response. Yet here we are, some nine years later. Our relationship with Curative has changed. We are no longer a Wound Care Center, but we remain a center that is dedicated to wound healing. The hospital location has changed, as has so much of the health care system in Massachusetts. Our "team" now consists of a well-seasoned group of Vascular Surgeons, Foot Surgeons, Plastic Surgeons, Primary Care Physicians, Nurse Practitioners, Nurses, Medical Assistants and Office Staff. Our outcomes have been significant; last quarter we hit an all time record of 92% healing outcome! We took the entire team out for a nice dinner to celebrate that accomplishment last week.

Work in wound care is just that; it is work. The hours are long and the demands are many. The diseases are challenging, not only to you as a physician and surgeon, but to you as a person. There have been many nights wherein I have had to call my wife to say that I had a "sick foot". To me, this usually meant a late night I&D on a septic diabetic. But for my wife, it meant that dinner at 6:00 pm was canceled.

On an average, my practice sees eight new patients a day. I think the last new patient number was 10,827. I have been in practice for thirteen-years (is that good luck or bad luck?). I have gone through one partner and one associate, and I currently have a part-time associate working with me. Do I make a lot of money? By most standards no, but I make enough. I do however have the respect of my peers; they are primary care physicians, emergency room physicians, general surgeons, vascular surgeons, endocrinologists, nurse practitioners, and nurses. Most importantly, I have the respect, trust and gratitude of my patients.

So why wound care? It sounds so difficult and cumbersome. Well, it is both of those things. And yet, the rewards are endless. While the financial reward really does not 'cover the cost', the personal reward more than makes up for it.

What makes this work so rewarding is the overwhelming appreciation of the patients and their family members. Their trials and successes become woven into the fabric of your practice and

their stories help to shape your individual makeup. Their steps forward, and the slides backward become a part of you. As a disease process progress, so does your appreciation of life and the things it has to offer.

I guess you need to ask yourself one question: what makes you tick? Are you ready to roll up your sleeves and jump into the action? In terms of wound care, there is a huge void out there, and our profession has the skills necessary to fill it. Being in the forefront of the fight against unnessesary amputation means helping people maintain the freedom that ambulation allows. I do not save lives, but I fight everyday to improve life for many people. This is the challenge that keeps me motivated, fulfilled and content. By accepting this challenge, I have improved the quality of my own life immeasurably. This is the challenge that I present to all of you.

There are, of course, other things that add to my success as a person. My beautiful wife helps, of course, as do our delicious 3-½ month old twins. And, of course, I can't forget my antique 1958 International TASK fire truck!

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