

(MS 1982, SECTION 214.07)

BOARD: Minnesota Board of Podiatry

LOCATION: 717 Delaware St. S.E.
Minneapolis, MN 55440

STATUTORY AUTHORITY: Chapter 153

REPORT PERIOD: July 1, 1982 To: June 30, 1984

SUBMITTED BY: David F. Schwietz Executive Secretary 9-22-84
Name Title Date

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Clause a: GENERAL STATEMENT OF BOARD ACTIVITIES

This description should cover both FY 83 and FY 84 and include any changes (additions/deletions) in activities between those years.

The Minnesota Board of Podiatry regulates the practice of Podiatry by establishing and enforcing the Law and Rules of the Board, by examining annually 5 to 10 candidates for licensure, by renewing licenses of approximately 120 practitioners and by investigating the 4 or 5 complaints received each year.

Clause b: TOTAL NUMBER MEETINGS HELD FY 83 4 FY 84 4 FY 83 AND 84 8

APPROXIMATE TOTAL NUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 83	FY 84	FY 83 & 84	TYPE	FY 83	FY 84	FY 83 & 84
Ann G. Rotramel, D.P.M.	Board	10½	15	25½	Travel	12	16	28
John McCarthy (Lay Member)	Board	13	15	28	Travel	28	28	56
James Salonen, D.P.M.	Board	9½		9½	Travel	14		14
S. Scott Standa, D.P.M.	Board		15	15	Travel		4	4
Beulah D. Johnson (Lay Member)	Board	13	2½	15½	Travel	4	1	5
Jean P. Weitzel (Lay Member)	Board		13½	13½	Travel		9	9
Harold Nirschl, D.P.M.	Board	13		13	Travel	28		28
Kenneth Paul, D.P.M.	Board	10½	4½	15	Travel	12	8	20

Clause b: TOTAL NUMBER MEETINGS HELD FY 83 4 FY 84 4 FY 83 AND 84 8

APPROXIMATE TOTAL NUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

BOARD MEMBER'S NAME	MEETING	HOURS			OTHER ACTIVITIES	HOURS		
	TYPE	FY 83	FY 84	FY 83 & 84	TYPE	FY 83	FY 84	FY 83 & 84
Michael Stone, D.P.M.	Board		15	15	Travel		36	36
Richard Lochner, D.P.M.	Board		12½	12½				
Alexander Worobel, D.P.M.	Board		5	5	Travel		1	1

Clause c: THE RECEIPT AND DISBURSEMENT OF BOARD FUNDS

	FY 83	FY .84	FY'S 83 & 84
Total State Appropriations	5.6	5.8	11.4
Total Non-Dedicated Fee Receipts	6.9	6.9	13.8
Total Disbursements	*4.3	5.9	10.2

COMMENTS (Optional)

* includes 2½% for indirect cost and general support.

Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 83 AND FY 84

FOR EASY REFERENCE PLEASE GIVE:

(A) Number of Board members required by statute: 7.(B) The statutory length of term: 4.

NAME & ADDRESS	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE-APPOINTMENT
Beulah Johnson-Excelsior	Lay Member	June 19, 1979 - Jan. 1, 1983
Richard Lochner - Mpls.	Podiatrist	Oct. 20, 1983 - Jan. 1, 1986
John McCarthy - Duluth	Lay Member	June 19, 1979 - Jan. 1, 1985
Harold Nirschl - Fergus Falls	Podiatrist	June 19, 1979 - Jan. 1, 1983
Kenneth Paul - Albert Lea	Podiatrist	June 19, 1980 - Jan. 1, 1984
Ann Rotramel - New Ulm	Podiatrist	May 22, 1981 - Jan. 1, 1985
James Salonen - Virginia	Podiatrist	June 19, 1979 - Jan. 1, 1983
S. Scott Standa - Shakopee	Podiatrist	Aug. 11, 1983 - Jan. 1, 1987
Michael Stone - Moorhead	Podiatrist	Aug. 11, 1983 - Jan. 1, 1987
Jean Weitzel - St. Cloud	Lay Member	Oct. 20, 1983 - Jan. 1, 1986
Alexander Worobel - St. Paul	Podiatrist	Feb. 15, 1984 - Jan. 1, 1988

Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED
DURING FY 83 AND/OR FY 84

NAME	JOB CLASSIFICATION/TITLE & CLASS	CLASS CODE	STATUS		
			FT	PT	Dates of Service
Eugene M. Larson	Executive Secretary	0472	x		6-1-79 to 9-7-82
David F. Schwietz	Executive Secretary	0472	x		9-8-82 -
Verna M. Nelson	Clerk Typist 2	0180	x		6-1-79 -

Clause 1: BRIEF SUMMARY OF BOARD RULES PROPOSED OR ADOPTED DURING THIS REPORTING PERIOD, FY 83 AND FY 84. GIVE APPROPRIATE CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR THOSE ADOPTED.

None

Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE
AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1984
(IN THE YEAR OF THE REPORT)

[illegible]

EXAMINATION:

[illegible]

WRITTEN

PRACTICAL

ORAL

Clauses i, j, k: MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION Podiatry license

AGE GROUP	FY 83									FY 84									FY 83 AND FY 84								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25																											
26-34	2	-	2	2	-	2	-	-	-	1	-	1	1	-	1	-	-	-	3	-	3	3	-	3	-	-	-
35-59																											
60-65																											
66 & Over																											
Total																											
Calculate % of Male and % of Female to the Total of Each Category																											
% of Total	100	-	100	100	-	100	-	-	100	100	-	100	100	-	100	-	-	100	100	-	100	100	-	100			100

Clauses i, j, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of Non-Minnesota Residents only who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION Podiatry license

AGE GROUP	FY 83									FY 84									FY 83 AND FY 84								
	EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS			EXAMINED			LIC/REGIS			NOT LIC/REGIS		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Under 18																											
18-25	1	1	2	1	1	2	-	-	-										1	1	2	1	1	2	-	-	-
26-34	2	-	2	2	-	2	-	-	-	4	-	4	4	-	4	-	-	-	6	-	6	6	-	6	-	-	-
35-59	1	-	1	-	-	-	1	-	1	1	-	1	-	-	-	1	-	1	2	-	2				2	-	2
60-65																											
66 & Over																											
Total	4	1	5	3	1	4	1	-	1	5	-	5	4	-	4	1	-	1	9	1	10	7	1	8	2	-	2

Calculate % of Male and % of Female to the Total of Each Category

% of Total	80	20	100	75	25	100	100	-	100	100	-	100	100	-	100	100	-	100	90	10	100	87	13	100	100	-	100
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State PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE

IA	1		1				1	-	1	1	-	1	-	-	-	1	-	1	2	-	2	-	-	-	2	-	2
CA										1	-	1	1	-	1	-	-	-	1	-	1	1	-	1	-	-	-
MI	-	-	-	-	-	-	-	-	-	2	-	2	2	-	2	-	-	-	2	-	2	2	-	2	-	-	-
OH	1	-	1	1	-	1	-	-	-	1	-	1	1	-	1	-	-	-	2	-	2	2	-	2	-	-	-
PA	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	1	1	-	-	-
NY	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	1	-	-	-
NE	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	1	-	-	-

Clause 1: THE NUMBER OF PERSONS NOT TAKING EXAMINATIONS WHO WERE LICENSED OR REGISTERED BY THE BOARD OR WHO WERE DENIED LICENSING OR REGISTRATION WITH THE REASONS FOR THE LICENSING OR REGISTRATION OR DENIAL THEREOF

TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND GRANTED LICENSES OR REGISTRATION	FY 83	FY 84	FY 83 & 84
	<u>3</u>	<u>3</u>	<u>6</u>
TOTAL NUMBER OF PERSONS <u>NOT</u> TAKING EXAMS AND DENIED LICENSES OR REGISTRATION			

FOR EACH PERSON GIVE:

Type of Lic./Regis.	State of Res.	AGE GROUP						SEX		* Method of Lic./Regis.			** Reasons for Granting or Denial
		0-18	18-25	26-34	35-59	60-69	66-	M	F		Grant	Deny	
Podiatry	Canada			X				X		reciprocity	x		met statutory require-
"	IL				X			X		"	X		" " "
"	FL				X			X		"	X		" " "
"	CA				X			X		"	X		" " "
"	MO				X			X		"	X		" " "
"	NE			X				X		"	X		" " "

* IDENTIFY METHOD: e.g. Application, Reciprocity, Endorsements, Credential Evaluation, Comity, etc.
 ** REASONS FOR GRANTING OR DENIAL: Attach Additional Sheets if necessary.

Clause n: LIST THE NUMBER OF COMPLAINTS AND OTHER COMMUNICATIONS RECEIVED BY THE EXECUTIVE SECRETARY, EACH BOARD MEMBER, EMPLOYEE OR OTHER PERSON PERFORMING SERVICES FOR THE BOARD

IN FY 83

2 Written
No.

2 Oral
No.

IN FY 84

3 Written
No.

5 Oral
No.

THAT ALLEGE OR IMPLY A VIOLATION OF
A STATUTE OR RULE WHICH THE BOARD
IS EMPOWERED TO ENFORCE.

IN FY 83

2 Written
No.

2 Oral
No.

IN FY 84

3 Written
No.

3 Oral
No.

WHICH ARE FORWARDED TO OTHER AGENCIES
AS REQUIRED BY M.S. 214.10.

Please indicate the number of complaints referred to each other governmental agencies in each fiscal year. (Federal, State, and Local).

Clause o: SUMMARIZE BY CATEGORY THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CLAUSE (n) OF M.S. 214.07 AND THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 214.10 and 214.1 (INDICATE AUTHORITY/CITATIONS FOR DISPOSITION).

(Dispositions occurring during this period of complaints and communications received prior to July 1, 1982, and complaints and communications received but not disposed of as of June 30, 1984 should be included).

SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY CATEGORY (Give number in each category)	SUMMARY OF RESPONSES AND DISPOSITIONS (Give number in each category)
Fees (3)	Refer to MN Podiatry Assn. Peer Review Committee (3)
Unprofessional conduct (3)	Refer to Attorney General
Malpractice (2)	Refer to Attorney Genral

Podiatry BOARD

Clause p: STATE ANY OTHER OBJECTIVE INFORMATION WHICH THE BOARD MEMBERS BELIEVE WILL BE USEFUL IN REVIEWING BOARD ACTIVITIES:

(For Example: In what other states do your licensees hold licenses? Number of Minnesota licenses verified/certified to other states? Number of inspections? Comparisons with past Biennial Reports?)

34 of the licensed podiatrists are residents of other states. The states represented are California, Colorado, Georgia, Iowa, Illinois, Indiana, Michigan, Missouri, Montana, Nebraska, New Mexico, New York, North Dakota, South Dakota, Tennessee, and Wisconsin.

There were no inspections.