## State Medical Board of Ohio 30 E. Broad Street, 3rd Floor, Columbus, OH 43215-6127

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September 19, 2013

Dear Dr.

:

This letter is in response to your inquiry concerning the scope of practice of podiatry regarding laser use for the treatment of nail fungus and scars. Specifically, you seek confirmation that it is within the scope of practice of an Ohio podiatrist to perform laser treatment for fingernail fungus and laser treatment for scars on the hand. In follow-up communications with General Counsel Sallie Debolt, you indicated that the treatment of hand scars would be for surgical scars, hypertrophic/keloid scars, and scars that have remolded unfavorably over time regardless of etiology.

At its September 12, 2013 meeting, the State Medical Board of Ohio approved the Scope of Practice Committee's determination that an Ohio podiatric physician who has successfully completed appropriate training may, as medically appropriate, provide treatment of fingernail fungus in podiatric patients and for treatment of scars on the hand when the etiology is not associated with trauma. The treatment for fingernail fungus may include the use of a laser that has been approved by the Food and Drug Administration ("FDA") for the treatment of Onychomycosis, where the laser provides a fungicidal effect. The treatment of hand scars may be performed by the use of a laser that has been approved by the FDA for scar treatment.

## **DISCUSSION:**

The scope of practice of podiatry in Ohio is defined in Section 4731.51, Ohio Revised Code, to include the following:

- The medical, mechanical, and surgical treatment of ailments of the foot, the muscles and tendons of the leg governing the functions of the foot; and superficial lesions of the hand other than those associated with trauma
- The use of such preparations, medicines, and drugs as may be necessary for the treatment of such ailments; and
- Treatment of local manifestations of systemic diseases as they appear in the hand and foot, but the patient must be concurrently referred to a medical or osteopathic physician for treatment of the systemic disease itself.

It is clear that a podiatrist may treat toenail fungus because it is an ailment of the foot. The only question concerns whether the podiatrist may also treat fingernail fungus. Fingernail fungus may or may not be a local manifestation of a systemic disease. However, the development of nail fungus is increased for persons with the systemic diseases of diabetes and peripheral vascular disease, which are two diseases for which podiatrists play a significant role in the delivery of medical and surgical services. The knowledge and skills required to treat fingernail fungus by laser is no different than that required to treat toenail fungus by laser in the same patient population. Therefore, it is reasonable that podiatrists be able to provide treatment for fingernail fungus, as medically appropriate, in podiatric patients, to include the use of a laser that has been approved by the FDA for the treatment of Onychomycosis, where the laser provides a fungicidal effect.

The laser treatment must be performed within the minimal standards of care.

The ability of a podiatrist to treat hand scars depends upon the etiology of the scar. The podiatric scope of practice includes the treatment of superficial lesions of the hand other than those associated with trauma and the treatment of local manifestations of systemic diseases as they appear in the hand. A scar that forms after surgery or injury, such as a hypertrophic or keloid scar, is a form of lesion, in that it is an abnormality of the skin. Except as discussed in this paragraph, a scar resulting from surgery or injury is not treatable by the podiatrist because a podiatrist may not treat a hand lesion that is associated with trauma. It should be noted, however, that a scar resulting from the natural healing process from a podiatrist's treatment of a superficial lesion may be treated by the podiatrist if the treatment rendered is part of a continuing course of treatment for the superficial lesion.

In contrast, a scar that forms secondary to a connective tissue disease or some other systemic disease is a local manifestation of a systemic disease and may be treated by the podiatrist when medically appropriate. To determine medical appropriateness, the podiatrist must first consult with the physician who is treating the patient for the systemic disease. If the patient does not have a physician for the systemic disease, the podiatrist must refer for a medical consult and agreement that the laser treatment is appropriate. When it is medically appropriate to treat a hand scar, the podiatrist need not inquire whether the patient's aim in seeking the treatment is for medical or cosmetic purposes. Treatment may be provided using a laser that has been approved by the FDA for scar treatment.

The laser treatment must be performed within the minimal standards of care.

Thank you for your inquiry. If you have questions about this response, please contact Sallie Debolt, General Counsel, at (614) 644-7021 or Sallie.Debolt@med.state.oh.us.

Sincerely,

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Anita M. Steinbergh, D.O. President Chair, Group 2 committees

This letter is only a guideline and should not be interpreted as being all inclusive or exclusive. The Board will review all possible violations of the Medical Practice Act and/or rules promulgated thereunder on a case by case basis.