

Stop Doing General Treatments and Routine Podiatry

It's interesting to search online for "podiatry general treatment" or "routine podiatry" because you get quite a lot of different ideas of what this consists of. I think we can all agree that most people don't understand our full scope of practice, so confusing them further by offering "general treatment" and "routine podiatry" does not necessarily address their problems.

The term "General Treatment" (GT) must have started somewhere, possibly in the days of vocational training, and I think it is a term we should stop using. Likewise, the use of "Routine Podiatry" which seems to be more common in the UK.

I get that we are trying to distinguish between consultations relating to different aspects of our scope, but we are not considering our patient's concerns or expectations. They don't care how we classify our consultations when they simply want to know if we can help them.

Some websites list Fungal Nails on their general treatment page, but also offer specific specialist treatments for fungal nail infections. Others list ingrown toenails and cracked heels, whilst also offering PNA/TNA procedures under local anaesthetic, and paraffin wax baths.

If we expect to be seen as the go-to profession for foot and ankle conditions, then perhaps we need to offer condition specific appointments and treatment options.

Take plantar warts as another example. There are a number of highly specialised wart treatments in use across podiatry, some of which require local anaesthesia, and others which

utilise specific equipment which is both costly and requires further training to use effectively. Wart treatments should never be considered as general or routine.

If you have read this far you may be starting to think I have a valid point. The trouble is going through the process of reclassifying your appointment systems and fees, training staff, updating your marketing material and a whole lot more. It has been a long held mantra in business – but I can't find where it originated, that you don't need more customers (patients) for your products (treatments), but you need more products (treatments) for your customers (patients). By reclassifying your appointments to be more specific to the condition or treatment, you are in fact offering more products, some of which your patients may not have been aware of.

At some point we have to work out what to call those consultations where you assist people with toenails and hyperkeratosis. For goodness sake be specific and descriptive. Let's start with the end in mind and consider the outcome that the patient expects.

We asked 165 new patients what outcome they were seeking from their podiatry appointment. They were able to tick more than one answer, and the results are below.



Even in the “other entries” nobody specified “General Treatment” even though lots did ask for “removal” of a problem.

So considering what people want, we need to be providing information in the form of diagnosis and treatment planning, along with pain relief. What this amounts to is comfort and empowerment. There is nothing General about that.

We could start calling our General Treatments or Routine Podiatry something like *Nail and Skin Recomforting*, or *Hard skin and Toenail Reduction*, even *Digital Enhancement* because that’s what our patients want.

How do you think you could redefine your consultations to better describe the desired outcome?

For motoring enthusiasts the 1930 Alfa Romeo 6C 1750 Gran Turismo is thought to have been the first GT vehicle. The year it was introduced, the 6C won every major racing event it entered. Each car wore custom bodywork from Europe’s finest coachbuilders, establishing the GT formula for decades to come. ([source](#))