# Trends in the Podiatric Profession A Comparative Study of 1970 and 1974 Survey Data

Information on all licensed podiatrists was collected in 1970 and 1974 through mailed questionnaires. The two questionnaires addressed essentially identical data elements and were coded and tabulated in comparable ways. Trends in the podiatric profession are discussed in this report by dealing with issues that impact on the general demographic characteristics of podiatrists, the characteristics of their clinical practice and the volume and nature of patient care administered during the week preceding the survey.

DHEW Publication No. (PHS) 79-1816

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
Office of the Assistant Secretary for Health
National Center for Health Statistics
Hyattsville, Md. November 1978



#### Library of Congress Cataloging in Publication Data

Greenberg, Leonard.

Trends in the Podiatric Profession

A Comparative Study of 1970 and 1974 Survey Data.

(Vital and health statistics: Series 14, Data from the National Health Survey, Data on national health resources, manpower, and facilities; no. 21) (DHEW publication; (PHS) 79-1816)

Includes bibliographical references.

1. Podiatrists—United States—Statistics. 2. Podiatry—United States—Statistics. I. Title. II. Series: United States. National Center for Health Statistics. Vital and health statistics: Series 14, Data on national health resources, manpower, and facilities; no. 21. III. Series: United States. Dept. of Health, Education, and Welfare. DHEW publication; (PHS) 79-1816. RD563.G73

362.1'9'75850973

79-606161

ISBN 0-8406-0139-5

### NATIONAL CENTER FOR HEALTH STATISTICS

DOROTHY P. RICE, Director

ROBERT A. ISRAEL, Deputy Director

JACOB J. FELDMAN, Ph.D., Associate Director for Analysis

GAIL F. FISHER, Ph.D., Associate Director for the Cooperative Health Statistics System

ELIJAH L. WHITE, Associate Director for Data Systems

JAMES T. BAIRD, JR., Ph.D., Associate Director for International Statistics

ROBERT C. HUBER, Associate Director for Management

MONROE G. SIRKEN, Ph.D., Associate Director for Mathematical Statistics

PETER L. HURLEY, Associate Director for Operations

JAMES M. ROBEY, Ph.D., Associate Director for Program Development

PAUL E. LEAVERTON, Ph.D., Associate Director for Research

ALICE HAYWOOD, Information Officer

#### DIVISION OF HEALTH MANPOWER AND FACILITIES STATISTICS

GLORIA KAPANTAIS, Director
SHELDON STARR, Deputy Director
EVELYN MATHIS, Chief, Health Facilities Statistics Branch
JOSEPH BARBANO, Chief, Health Manpower Statistics Branch
CHARLES M. CRONER, Ph.D., Chief, Technical Services Branch

Vital and Health Statistics-Series 14-No. 21

# **CONTENTS**

Introduction	
Data Sources and Issues Treated	
Summary of Findings	
Age Distribution	
Podiatrist-Population Ratios	
Sex Distribution	
Years Active in Podiatry	
Principal Form of Employment	-
Use of Assistants	4
Primary Clinical Activity	
Types of Patient Services Rendered	
Hours Worked	٤
Patient Visits	
Treatment Setting	
Age of Patient	-
	4
General Profile	
Age Distribution	
Podiatrist-Population Ratios	•
Sex Distribution	-
Years Active in Podiatry	7
Characteristics of Clinical Practice	8
Principal Form of Employment	8
Use of Assistants	8
Primary Clinical Activity	10
Types of Patient Services Rendered	10
Volume and Nature of Patient Care	10
Hours Worked	10
Patient Visits	11
Treatment Setting	13
Age of Patient	14
	•
References	15
List of Detailed Tables	16
Appendixes	
L Description of Survey Methodology	27
II. Definitions	30
III. Productivity as Related to Use of Auxiliary Personnel, Various Age Groups	32
IV. Facsimiles of Survey Questionnaires	36
LIST OF FIGURES	
Number of podiatrists providing patient care, by age of podiatrist: United States, 1970 and	
1074	

#### LIST OF TEXT TABLES

А.	Percent of podiatrists in the outer age brackets (under 35 years or 65 years or over) providing patient care and ratio of podiatrists between 35 and 65 years of age to those in the outer age brackets, by year of survey: United States, 1970 and 1974
В.	Percent of podiatrists under 35 years and 65 years or over providing patient care and replacement rate, by geographic region and year of survey: United States, 1970 and 1974
C.	Number of podiatrists between 35 and 44 years of age providing patient care, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974
D.	Ratio of podiatrists under 45 years of age to those 65 years or over providing patient care, by geographic area: United States, 1970 and 1974
E.	Number and percent distribution of podiatrists providing patient care, by years active in podiatry: United States, 1970 and 1974
F.	Number of podiatrists providing patient care, by number of years active in podiatry and year of survey: United States, 1970 and 1974
G.	Percent of podiatrists providing patient care engaged in partnerships or group practice with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974
H.	Percent distribution of podiatrists providing patient care by principal form of employment, according to geographic region and year of survey: United States, 1970 and 1974
J.	Percent of podiatrists providing patient care and using 1 assistant or more, with change between 1970 and 1974, by principal form of employment: United States, 1970 and 1974
K.	Percent of podiatrists providing patient care and using 1 assistant or more, with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974
L.	Percent of podiatrists providing patient care, with change between 1970 and 1974, by age of podiatrist, primary clinical practice, and year of survey: United States, 1970 and 1974
М.	Percent of podiatrists who devoted 35 hours or more to patient care, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974
N.	Percent of podiatrists who devoted 35 hours or more to patient care during the preceding week, with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974
0.	Percent of podiatrists who devoted 35 hours or more to patient care during preceding week, with change between 1970 and 1974, by principal form of employment and year of survey:  United States, 1970 and 1974
Р.	Median number of patient visits per week, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974
Q.	Median number of patient visits per week, with change between 1970 and 1974, by age of podiatrist providing patient care and year of survey: United States, 1970 and 1974
R.	Median number of patient visits per week, with change between 1970 and 1974, by principal form of employment of podiatrist providing patient care and year of survey: United States, 1970 and 1974
S.	Median number of patient visits per week, with change between 1970 and 1974, by number of full- and part-time assistants to podiatrists providing patient care and year of survey: United States, 1970 and 1974
T.	Percent of podiatrists providing patient care with 100 patient visits or more during preceding week, with change between 1970 and 1974, by selected characteristics of podiatrist and year of survey: United States, 1970 and 1974

U.	Percent distribution of patients, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974	13
w.	Percent of podiatrists providing patient care, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974	13
x.	Median age of podiatrists providing patient care, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974	14
Y.	Number and percent distribution of patients treated during week preceding survey, by age of patient and year of survey: United States, 1970 and 1974	14

## 

# TRENDS IN THE PODIATRIC PROFESSION: A COMPARATIVE STUDY OF 1970 AND 1974 SURVEY DATA

Leonard Greenberg, Formerly with Division of Health Manpower and Facilities Statistics

#### INTRODUCTION

During the period from October through December 1974, the National Center for Health Statistics (NCHS) conducted a survey of the Nation's podiatrists in cooperation with the American Podiatry Association. Of the 8,261 licensed podiatrists to whom self-administered questionnaires were mailed, valid responses were received from 7,253, a response rate of 88 percent. The results of the survey disclosed that 7,085 podiatrists were actively engaged in administering patient care during this period. 1-3 The methodology employed in conducting the survey and in analyzing its results is described in appendix I; the questionnaires employed are shown in appendix IV.

In this publication the reported results of the 1974 survey are compared with those obtained during an earlier survey, similar in scope, conducted in 1970.<sup>4-6</sup> Trends, to the extent discernible from the published data, are highlighted and their implications in terms of manpower planning and other policy considerations are dealt with at some length.

# DATA SOURCES AND ISSUES TREATED

The data sources employed in producing this report include detailed tables covering the 1974 survey<sup>1-3</sup> and the survey conducted in 1970.<sup>4-6</sup>

Additional use was made of special tabulations produced by NCHS in support of an earlier project conducted by the author.<sup>7</sup>

It should be noted that the questionnaires employed in the two surveys differed in several respects. The major differences were:

- The 1974 questionnaire addressed the issue of the podiatrist's race/ethnicity; the 1970 questionnaire did not.
- The 1970 questionnaire asked the podiatrist to estimate the sex distribution of patients; the 1974 questionnaire did not.

Apart from these differences, however, the two questionnaires addressed essentially identical data elements, subsequently encoded and tabulated in comparable ways. The specific issues selected for treatment in this report are as follows:

- 1. Issues that deal with the general profile of podiatrists
  - their age distribution
  - their sex distribution
  - their number of years active in podiatry

In addition to these issues, which are based on direct questionnaire responses, a special section of this report is devoted to the derived measure, podiatrist-population ratios.

- 2. Issues that deal with the characteristics of clinical practice
  - principal form of employment
  - number of assistants
  - primary clinical activity
  - types of patient services rendered
- 3. Issues that deal with the volume and nature of patient care administered during the week preceding the survey
  - hours worked
  - number of patient visits
  - treatment setting
  - age of patients seen

#### **SUMMARY OF FINDINGS**

Highlighted in this summary of findings are the major observations derived through a comparison of the 1970 and 1974 data.

#### Age Distribution

Although the median age of podiatrists has remained the same (51 years), there were in 1974 a greater percentage of older (65 or over) and younger (under 35) podiatrists than in 1970. In both years, the age distribution showed a distinct unevenness in the middle, with many more podiatrists between ages 45 and 54 than between 35 and 44. Morever, the numerical disparity between these two age groups has widened materially since 1970.

Nationwide, the ranks of podiatrists under age 35 are growing at almost twice the rate as those over 65. However, when one considers the total number of podiatrists under age 45, compared to those over 65, that ratio declined from 3.3 in 1970 to 2.8 in 1974. Moreover, in certain geographic divisions—specifically, the New England and West North Central Divisions—the ratio went from substantially greater than to substantially less than 2.0, a development that warrants special attention.

#### **Podiatrist-Population Ratios**

The ratio of podiatrists per 100,000 population who provide patient care dipped slightly, from 3.5 in 1970 to 3.4 in 1974. Five of the nine geographic divisions showed declines; the largest decline occurred in New England where the podiatrist-population ratio dropped from 5.9 to 5.1 per 100,000. Gains were noted only in the South Atlantic and Pacific Divisions, whose podiatrist-population ratios (2.1 and 3.2, respectively) nonetheless remained well below the national average. The Nation's least well supplied areas, from the standpoint of podiatric manpower, remain the East South Central and West South Central Divisions, with ratios of 0.9 and 1.5, respectively; neither of these divisions showed an increase.

#### Sex Distribution

The number of female podiatrists declined substantially, from 315 in 1970 to 271 in 1974. The age disparities noted earlier for the podiatric community as a whole are accentuated for women: In 1970, 59 percent of the Nation's female podiatrists were 55 years or older; by 1974, that proportion had increased to 64 percent, with no clear evidence of meaningful replacement at the younger age levels. Less than 1 percent of the Nation's podiatrists under age 35 were women.

#### Years Active in Podiatry

In 1970, podiatrists with 20 or more years of prior activity were a bare majority (52.6 percent). By 1974, that proportion had climbed to over 60 percent, indicating that the increased infusion of younger podiatrists in the early 1970's had not yet—as of 1974—made a material numerical impact.

#### **Principal Form of Employment**

The percent of podiatrists engaged in solo practice declined from 86 to 81 percent between 1970 and 1974 and the percent engaged in partnerships and group practice went from 8 to 16 percent. Most of the latter increase took place among podiatrists under age 45, although shifts toward partnerships and group practice were noted among older podiatrists as well. Comparable shifts in mode of employment were noted in all four geographic regions, with the South and

West registering slightly greater increases than did the Northeast and North Central Regions.

#### Use of Assistants

At all age levels, in all geographic regions, and within all forms of employment, there has been a marked increase in the use of assistants, both medical and nonmedical.

Nationwide, the percent of podiatrists with one or more assistants rose from 62 percent in 1970 to 73 percent in 1974. Almost all of that increase is attributable to the rise in percent of podiatrists with part-time assistants; the percent with one or more full-time assistants has remained virtually unchanged, indicating that those employing assistants for the first time are tending toward the employment of part-time help. Significantly, however, the percent of podiatrists with two or more full-time assistants has risen sharply (from 13 to 23 percent), reflecting an increased tendency among those who already employ full-time assistants to employ them in greater numbers.

#### **Primary Clinical Activity**

A marked shift was noted toward the reporting of surgery as one's primary clinical activity. The percent of podiatrists who reported general practice as their primary activity dropped from 90 to 84 percent, and the percent who reported surgery rose from 6 to 11 percent. The bulk of the latter increase took place among younger podiatrists, although some increase was noted among older podiatrists as well.

#### **Types of Patient Services Rendered**

Little change took place in the types of patient services rendered. Palliative and orthopedic services continued to be performed by over 90 percent of the Nation's podiatrists, and the prescription of drugs was close behind. Hospital surgery was on the rise, however. Only 30 percent reported it in 1970 as compared with 39 percent in 1974, by far the largest increase noted for any single form of service. Among podiatrists under age 35, a substantial majority reported hospital surgery as a "usual" service, as

against approximately 30 percent of those aged 55 or older.

#### **Hours Worked**

Despite the slight reduction in podiatrist-population ratio, there has seemingly been no corresponding increase in number of hours worked. The median number of hours devoted to patient care during the week preceding the survey dipped from 38.2 in 1970 to 37.4 in 1974, and the percent of podiatrists who devoted 35 hours or more each week to patient care declined from 70 to 68 percent.

The apparent tendency toward a shorter workweek was most evident among older podiatrists and among those who are self-employed. Salaried podiatrists and those under age 35 showed an *increased* number of hours devoted to patient care. To what extent these fluctuations can be attributed to seasonal factors (considering the different times of year at which the 1970 and 1974 surveys were conducted) is unknown.

#### **Patient Visits**

Notwithstanding the reduction in workweek, podiatrist productivity (measured in number of patient visits per week) increased sharply. The median number of patient visits rose from 71 to 77 and the percent of podiatrists who administered 100 patient visits or more during the preceding week went from 24 to 34 percent.

Gains in productivity were chiefly evident among younger podiatrists and among those engaged in partnerships and group practice. There is strong inferential evidence that these gains can be attributed almost exclusively to the increased use of both full- and part-time assistants.

From a geographic standpoint, the greatest gains were registered in the Northeast and North Central Regions, although the South remained the region with the highest unit productivity. The median number of patient visits per week in the South was 83 in 1974 (up from 80 in 1970), followed in order by the North Central (79), Northeast (76), and West (72). All of these figures represent gains since 1970, but the largest single increase was noted in the North Central

Region, which in 1970 had a median productivity of only 69.

#### **Treatment Setting**

As with the types of services rendered, the distribution of treatment settings remained fundamentally unchanged. Roughly 5 out of every 6 patients (84 percent) continued to be treated in the podiatrist's office and an additional 6 percent were treated in nursing homes. The remaining 10 percent of patients were treated in hospitals (5.4 percent), clinics (2.9 percent), and in the patient's home or other setting (1.6 percent). Home visits were only about half as frequent as in 1970, and clinic visits were slightly more common. The numbers involved, however, were quite small compared to the total universe of patient visits.

The median age of podiatrists involved in hospital and clinic treatment settings tended to be lower—both in 1970 and 1974—than that of those who treated patients in the office, the patient's home, or in nursing homes.

#### Age of Patient

Although podiatrists have traditionally treated a higher percent of older patients than young ones, the ratio of old-to-young has risen somewhat since 1970. In 1970, that ratio stood at 2.6 (31 percent old vs. 12 percent young); by 1974, it had reached 3.5 (35 percent old vs. 10 percent young).<sup>a</sup>

#### GENERAL PROFILE

#### Age Distribution

The numbers presented in this and the ensuing sections pertain only to podiatrists who provide patient care. There were 7,078 such podiatrists in 1970 and 7,085 in 1974. The distribution of podiatrists, by age and geographic area, is shown in table 1.

Although the median age of podiatrists—51 years—remained fundamentally unchanged be-

3(O14); - 4-C; - 4 - - - - Ct - - - - - 14 - - (t - - - - - )

Two specific aspects of the age distribution stand out. The first is that the gap (between those aged 35 to 44 years and those immediately older) has widened. The second is that the ranks of all three age groups (35-44 years, 45-54 years, 55-64 years) combined has decreased by almost 10 percent—from 5,415 in 1970 to 4,920 in 1974.

On a gross nationwide basis, from the standpoint of sheer numbers, the declines within these inner age brackets have been compensated

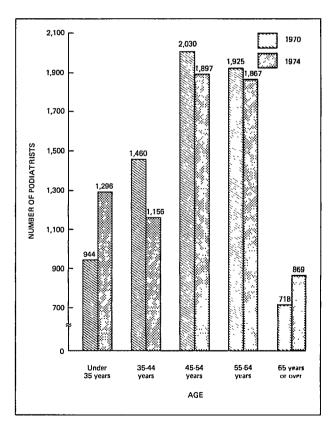


Figure 1. Number of podiatrists providing patient care, by age of podiatrist: United States, 1970 and 1974

tween 1970 and 1974, the shape of the distribution showed signs of revision. By 1974, the number of podiatrists at the outer age extremes had increased and the ranks of those within the inner age brackets had declined (see figure 1). One of the striking features of the age distribution—in 1974 as in 1970—is its unevenness. In both years, there were substantially fewer podiatrists between ages 35 and 44 than in either of the 10-year cohorts immediately ahead.

<sup>&</sup>lt;sup>a</sup> "Old" is defined as age 65 years or older; "young" is 16 years or under.

for by corresponding increases at the extremes. As a consequence, the total number of podiatrists engaged in patient care has remained fundamentally unchanged as has their median age. The increased concentration of podiatrists at the outer extremes has led, however, to a profession in which almost 1 podiatrist in 3 is either under age 35 or over 64. This is a marked shift from 1970, in which the corresponding ratio was less than 1 in 4 (see table A).

On the positive side, these figures indicate that the ranks of the younger podiatrists are growing twice as fast as the ranks of those approaching retirement age, thereby assuring an increasing supply over the next few years. This situation, however, does not hold true across the

Nation. As shown in table B, older podiatrists are only barely being replaced in the Northeast, and the North Central Region is only slightly better off.

Compounding the issue of geographic disparity, the regions with the lowest replacement rates as shown in table B are also characterized by the greatest decline in number of podiatrists between the ages of 35 and 44 (see table C).

As a result of the factors just cited, the age profile of podiatrists in the Northeast and North Central Regions has taken an upward turn. The ratio of podiatrists of less than middle age (i.e., under 45 years) to those approaching retirement (65 years or over) has dropped substantially in both of these regions, as well as in each of their

Table A. Percent of podiatrists in the outer age brackets (under 35 years or 65 years or over) providing patient care and ratio of podiatrists between 35 and 65 years of age to those in the outer age brackets, by year of survey: United States, 1970 and 1974

	Oute	Ratio of podiatrists		
Year of survey	Both groups combined	Under 35 years	65 years or over	between 35 and 65 years to those in outer age brackets
	Percent of podiatrists			
1970 1974	23.5   13.3   10.2 30.6   18.3   12.3		3.26 to 1 2.27 to 1	
Change, 1970-74	+7.1 +5.0 +2.1			

Table B. Percent of podiatrists under 35 years and 65 years or over providing patient care and replacement rate, by geographic region and year of survey: United States, 1970 and 1974

Geographic region and year of survey	Percent of podiatrists under 35 years (A)	Percent of podiatrists 65 years or over (B)	Replacement rate (A) – (B)
Northeast:			
1970	9.9	10.1	-0.2
1974	14.7	14.3	+0.4
North Central:			
1970	13.6	11.1	+2.5
1974	16.9	13.6	+3.3
South:			
1970	17.7	8.4	+9.3
1974	26.3	6.9	+19.4
West:			
1970	18.6	10.0	+8.6
1974	21.9	10.1	+11.8

Table C. Number of podiatrists between 35 and 44 years of age providing patient care, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974

	Year of survey		
Geographic region	1970	1974	1970-74
	Nun		
United States	1,460	1,156	-304
Northeast North Central South West	533 463 239 225	356 336 230 233	-177 -127 -9 +8

NOTE: Numbers may not add to totals due to rounding.

component divisions separately. In New England, for example, the ratio of less-than-middleage to retirement-age podiatrists has been halved in 4 years—from 2.2 in 1970 to 1.1 in 1974. By way of contrast, that ratio has climbed from 6.4 to 9.0 in the South Atlantic Division and from 3.0 to 5.4 in the Mountain Division. The relevant figures, broken down by geographic region and division, are presented in table 2.

Nationwide, the ratio of less-than-middle-age to retirement-age podiatrists declined from 3.3 in 1970 to 2.8 in 1974. Regions and divisions with greater- and less-than-average ratios in each

of those years are shown in table D. As noted, the Mountain Region, originally below the nationwide average, is now above; the East North Central Region, originally above average, is now below.

#### **Podiatrist-Population Ratios**

Since the number of podiatrists who provide patient care has increased by only a tenth of a percent in 4 years, during which time the total population has climbed by almost 4 percent, the number of podiatrists per 100,000 population has declined slightly—from 3.5 per 100,000 population in 1970 to 3.4 in 1974.

Not surprisingly, the decline has been greatest in those geographic areas that show the greatest upward turn in age profile—the Northeast and North Central Regions and their component divisions. All other regions and divisions have remained essentially stable, except for the South Atlantic Division in which there has been some modest growth (see table 3).

The decline in the podiatrist-population ratios in the Northeast Region (and in the New England and Middle Atlantic Divisions) might be regarded as the first step toward a more uniform nationwide distribution, and not necessarily as a cause for concern. The decline in the North Central Region, however—and particularly in the

Table D. Ratio of podiatrists under 45 years of age to those 65 years or over providing patient care, by geographic area: United States, 1970 and 1974

Ratio	1970	1974
Regions: Greater-than-average	South West	Unchanged
Less-than-average	Northeast North Central	Unchanged
Divisions: Greater-than-average	East North Central South Atlantic West South Central Pacific	South Atlantic West South Central Mountain <sup>1</sup> Pacific
Less-than-average	New England Middle Atlantic West North Central East South Central Mountain	New England Middle Atlantic East North Central West North Central

<sup>&</sup>lt;sup>1</sup>Denotes change.

West North Central Division—does constitute cause for concern because these units were, in 1974, at or below the national average. Whether or not increased enrollment in the schools of podiatric medicine, spurred by Public Law 94-484, will serve to reverse these trends (and to stimulate growth in other areas) remains to be seen.

#### Sex Distribution

A second major area of change with respect to the universe of podiatrists is that of sex. In 1970, there were 315 female podiatrists administering patient care; by 1974, that figure had dropped to 271, a decline of 14 percent.

The reason for the decline is evident from an examination of the age distribution of female podiatrists. As shown in table 4, they are chiefly to be found in the upper age brackets. In 1970, for example, females accounted for only 1.0 percent of podiatrists under the age of 35 but 10 percent of those age 65 or over; by 1974, both of these percents had declined.

Women, clearly, are retiring from the profession at a much higher rate than they are being replaced. Again, whether this trend will be reversed through increased enrollment of female students remains to be seen.

#### Years Active in Podiatry

A further characteristic of podiatrists, for which comparison is permitted by the 1970 and 1974 data, is "years active in podiatry." The relevant figures are presented in table E.

As with age, the distribution of years of activity is highly uneven. In 1970, those with 10 to 19 years of activity heavily outnumbered

the cohort immediately behind (28.8 to 18.6 percent). In 1974, a similar phenomenon (shifted slightly due to the passage of time) is noted with respect to those with 20 to 29 years of activity. In both years, well over 50 percent of the podiatrists engaged in patient care have had more than 20 years of prior activity—52.6 percent in 1970, increasing to 60.2 percent in 1974. These figures indicate an aging process that can only be reversed through an increased infusion of new podiatrists.

Table E. Number and percent distribution of podiatrists providing patient care, by years active in podiatry and year of survey: United States, 1970 and 1974

Years active in	19	70	1974		
podiatry	Number	Percent	Number	Percent	
Total	7,078	100.0	7,085	100.0	
0-9 years 10-19 years 20-29 years 30 years or more	1,314 2,040 1,542 2,182	18.6 28.8 21.8 30.8	1,529 1,289 2,122 2,143	21.6 18.2 30.0 30.2	

NOTE: Numbers may not add to totals due to rounding.

The 1974 data on years of activity, unlike those reported in 1970, were subdivided into 5-rather than 10-year intervals. A useful by-product of this feature is that it permits the two sets of data to be checked for mutual consistency. Making use of the fact that the two surveys were conducted essentially 5 years apart (January-March 1970 vs. October-December 1974), the data were compared to see if the number of podiatrists who, in 1970, reported x years of prior activity equaled the number who, in 1974, reported x + 5 years of prior activity. The comparison in question is shown in table F.

Table F. Number of podiatrists providing patient care, by number of years active in podiatry and year of survey: United States, 1970 and 1974

			Number	of years a	ctive in p	odiatry		
Year of survey	0-9	10-19	20-29	30 or more	5-14	15-24	25-34	35 or more
	Number of podiatrists							
1970	1,314	2,040	1,542 	2,182 · · ·	 1,325	2,041	1,333	1,578

For the two youngest cohorts, the comparative figures are remarkably close—1,314 versus 1,325 and 2,040 versus 2,041. The closeness of these figures reinforces the credibility of the data and indicates that the 5-year attrition for these two groups was undoubtedly very small.

For those with greater numbers of years of experience, the differences are larger, but in the right direction and of reasonable magnitude. Moreover, they provide some measure of the attrition levels characteristic of the profession: Of the 1,542 podiatrists who reported 20 to 29 years of prior activity in 1970, some 200 were apparently no longer active in 1974, and of the 2,182 who reported 30 years or more of prior activity, some 600 were no longer active. Both of these levels of attrition seem reasonable.

# CHARACTERISTICS OF CLINICAL PRACTICE

#### Principal Form of Employment

Although solo practice remains the most common form of employment—particularly among older podiatrists—the percent engaged in partnerships and group practice has risen markedly since 1970. The increase is evident at all age levels but particularly among younger podiatrists (see table G).

Changes in employment among podiatrists 35 years or older are largely attributable to de-

Table G. Percent of podiatrists providing patient care engaged in partnerships or group practice, with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974

	Year of survey Ch		' Change		Change,
Age of podiatrist	1970	1970-74			
	Perce podia				
All ages	8.3	+7.5			
Under 35 years	16.9 9.2 7.2 5.5 5.4	+15.7 +11.8 +4.1 +4.2 +1.5			

clines in solo practice. Within the youngest age group, however, the change is chiefly in the "salaried and other" category, as shown in table 5

Another way of viewing changes in mode of employment among younger podiatrists is as follows: In 1970, only 78.4 percent of those under age 35 were self-employed; by 1974, that figure had risen to 92.7 percent.

Nationwide, the percent of podiatrists engaged in solo practice declined from 85.7 to 80.7 percent, and the percent of salaried and other practitioners declined from 6.1 to 3.5 percent. The combined drop of 7.6 percent equals (except for rounding error) the gain in partnerships and group practice noted earlier.

Increases in the percent of podiatrists engaged in partnerships and group practice were fairly uniform among the four geographic regions. The smallest increase (5.9 percent) was in the North Central Region; the largest (10.9 percent) took place in the South (see table H).

Declines in the "salaried and other" category ranged from a low of 2.0 percent in the South to a high of 3.4 percent in the West. The nationwide average drop, noted earlier, was 2.6 percent.

Declines in solo practice ranged from a low of 2.7 percent in the North Central Region to a high of 9.0 percent in the South. The nationwide average drop was 5.0 percent.

#### Use of Assistants

The use of office assistants, both medical and nonmedical, has increased. In 1970, about 62 percent of all podiatrists engaged in patient care employed one or more assistants; by 1974, that percent had increased to 73 percent.

Undoubtedly, the greater use of assistants is associated with the greater tendency toward partnerships and group practice. However, even solo practitioners are making greater use of assistants, as shown in table J.

The increased use of assistants is greatest among those age groups that showed the greatest trend toward partnerships and group practice. The relevant figures are shown in table K. Two aspects of this increased use of assistants are of particular note. The first is that the increase is almost wholly attributable to the greater use of part-time, rather than full-time, personnel. Spe-

Table H. Percent distribution of podiatrists providing patient care by principal form of employment, according to geographic region and year of survey: United States, 1970 and 1974

Geographic region and year of survey	Total	Solo practice	Partnership or group practice	Salaried and other
	Percent distribution			· · · · · · · · · · · · · · · · · · ·
Northeast:				
1970	100.0	87.6	7.0	5.4
1974	100.0	83.8	13.6	2.6
North Central:				
1970	100.0	84.6	8.5	6.9
1974	100.0	81.9	14.4	3.8
South:				
1970	100.0	82.9	11.0	6.1
1974	100.0	73.9	21.9	4.1
West:				
1970	100.0	83.2	8.8	8.0
1974	100.0	77.7	17.6	4.6

Table J. Percent of podiatrists providing patient care and using 1 assistant 1 or more, with change between 1970 and 1974, by principal form of employment: United States, 1970 and 1974

	Year o	Year of survey	
Principal form of employment	1970	1974	Change, 1970-74
	Percent of podiatrists		_
All forms	61.8 72.8		+11.0
Solo practice	60.6 86.8 89.0	68.8 94.6 91.0	+8.2 +7.8 +2.0

<sup>&</sup>lt;sup>1</sup>Includes both medical and nonmedical assistants.

Table K. Percent of podiatrists providing patient care and using 1 assistant 1 or more, with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974

Age of podiatries	Year o	Change,	
Age of podiatrist	1970	1974	1970-74
	Percent of podiatrists		
Under 35 years	73.4	91.6 90.7	+18.2 +13.6
45-54 years	66.8	75.6	+8.8
55-64 years	50.4	61.5	+11.1
65 years or over	32.3	38.9	+6.6

cifically, the percentage of podiatrists with parttime assistants has risen over 11 percent since 1970 (from 32.4 to 43.5 percent); the figure associated with *full-time* assistants has barely changed (48.3 percent vs. 47.5 percent). (See table 6.)

On the other hand, despite the relatively small increase in percent of podiatrists with one or more full-time assistants, the percent with two or more has almost doubled—from 13.0 to 23.4 percent—indicating that those podiatrists who did employ full-time assistants tended to employ them in greater numbers.

Age of podiatrist.—Podiatrists of all age levels showed both of the tendencies just noted: the greater use of part-time assistants and the greater prevalence of two or more full-time assistants. Only podiatrists under age 45, however, showed a tendency to hire full-time assistants where none previously worked.

Geographic region.—All four regions are fairly uniform in the degree of change noted. Regional differences are essentially in terms of level—that is, podiatrists in the South and West were more apt to use full-time assistants than were those in the Northeast and North Central Regions—rather than in terms of change.

Principal form of employment.—Interestingly, all three forms of self-employment showed a decrease in the percent of podiatrists with one or more full-time assistants. Only the

Table L. Percent of podiatrists providing patient care, with change between 1970 and 1974, by age of podiatrist, primary clinical activity, and year of survey: United States, 1970 and 1974

		General practice			Surgery		
Age of podiatrist	1970	1974	Change, 1970-74	1970	1974	Change, 1970-74	
		ent of atrists			ent of atrists		
All ages	89.9	83.8	6.1	5.7	11.0	+5.3	
Under 35 years	75.5 86.1 92.9 95.0 94.3	68.2 76.6 87.2 91.4 92.3	-7.3 -9.5 -5.7 -3.6 -2.0	17.9 8.7 3.7 1.5	26.0 18.5 7.3 3.2 3.0	+8.1 +9.8 +3.6 +1.7 +1.9	

increased tendency toward partnerships and group practice has kept the nationwide percent from declining. Again, these figures confirm that the use of part-time assistants is finding greater favor and that podiatrists—regardless of their mode of employment—are more likely to take on a full-time assistant if they already have one on staff.

#### **Primary Clinical Activity**

The percent of podiatrists who reported that their primary clinical activity was "general practice" declined from 89.9 percent in 1970 to 83.8 percent in 1974. Corresponding to that decline, the percent whose reported primary activity was "surgery" increased from 5.7 to 11.0 percent. This shift toward greater emphasis upon surgery was manifest at all age levels, but was predominant among younger podiatrists as shown in table L.

#### Types of Patient Services Rendered

The types of patient services rendered by podiatrists, in 1970 and 1974, are shown in table 7.

Except for hospital surgery, the percent changes are generally small and the order is fundamentally unchanged. Palliative services remained the most common form of treatment with orthopedic services and the prescription of drugs following closely behind. Low-voltage treatment and diathermy, which were among the least common types of services in 1970, have become less common. In addition to hospital

surgery, ultrasonic treatment, office surgery, and X-ray services have become more common.

Insight as to the relative frequency with which certain services are performed by various age groups may be gained from table 8. In that table, services are grouped into four categories according to the percent of podiatrists who performed them: almost all (more than 90 percent), most (60 to 90 percent), many (30 to 60 percent), and some (less than 30 percent).

Viewed from that standpoint, there are six services which almost all podiatrists under the age of 45 performed: palliative services, office surgery, prescription of drugs, physical therapy, orthopedic services, and X-ray services, but only one service which almost all podiatrists 55 years or older performed—palliative services. That pattern, evident in 1970, remained unchanged in 1974.

Hospital surgery, office surgery, physical therapy treatment, and X-ray services became less common as the age of the podiatrist increased. Diathermy, low-voltage treatment, ultraviolet lamp treatment, and the fitting of special shoes are seen to be essentially invariant with age. Apart from hospital surgery, no major changes were noted between 1970 and 1974.

# VOLUME AND NATURE OF PATIENT CARE

#### **Hours Worked**

The median number of hours per week devoted to patient care showed a slight

decline—from 38.2 in 1970 to 37.4 in 1974. Along with that decline, the percent of podiatrists who reported having devoted 35 hours or more to patient care during the preceding week dipped from 70 to 68 percent.

The South remained the region in which the greatest percent of podiatrists provided at least 35 hours of patient care per week. In all four regions, however, that percent showed some degree of decline (see table M).

Not all age groups followed the nationwide trend, however. Those in the youngest age brackets, perhaps because of their increasing involvement in partnerships and group practice, showed a distinct tendency toward an *increased* number of hours of patient care per week, as shown in table N.

About 3 in every 4 podiatrists engaged in partnership or group practice devoted at least 35

Table M. Percent of podiatrists who devoted 35 hours or more to patient care, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974

<del></del>			
Comments	Year of survey		Change,
Geographic region	1970	1974	1970-74
United States	Percent of podiatrists		-1.8
Northeast	69.3 69.5 73.8 68.8	69.1 66.9 71.3 64.6	-0.2 -2.6 -2.5 -4.2

Table N. Percent of podiatrists who devoted 35 hours or more to patient care during the preceding week, with change between 1970 and 1974, by age of podiatrist and year of survey: United States, 1970 and 1974

**************************************			
Age of podiotries	Year of survey		Change, 1970-74
Age of podiatrist		1974	
Under 35 years		75.0 72.1 72.9 68.6 41.4	+6.0 -2.3 -1.8 -2.5 -4.0

hours per week to patient care, as opposed to 2 of every 3 solo practitioners. Except for those engaged in partnerships, these figures represent a substantial decline since 1970. Among salaried and other podiatrists, however, the comparable percent has gone up—from 40 percent in 1970 to 68 percent in 1974. The figures in question are shown in table O. Table 9 summarizes these data on hours worked in 1970 and 1974.

#### **Patient Visits**

Table 10 shows the median number of patient visits per week, by selected characteristics, for 1970 and 1974.

Despite the noted decline in number of hours devoted to patient care, the median number of patient visits per week increased by almost 10 percent—from 71 in 1970 to 77 in 1974. The South remained the region with the highest weekly median number of patient visits, but the Northeast and North Central Regions made great strides, as shown in table P.

The greatest gains in productivity were noted among those podiatrists under age 55. Podiatrists in the 35-44-year age bracket remained the most productive, but those under age 35 and between 45 and 54 years also showed gains (see table Q).

Some portion of these gains is undoubtedly attributable to changes in principal form of employment—toward partnerships and group practice. The latter forms of employment are by far the most productive, outstripping solo practice by an even greater margin than they did in 1970 (see table R).

Table O. Percent of podiatrists who devoted 35 hours or more to patient care during preceding week with change between 1970 and 1974, by principal form of employment and year of survey: United States, 1970 and 1974

Principal form of	Year of	Change,	
employment	1970	1974	1970-74
	Percent of podiatrists		
Self employed: Solo practice Partnership Group practice	70.0 74.6 80.5	66.8 74.7 74.2	−3.2 +0.1 −6.3
Salaried and other	39.7	67.9	+28.2

Table P. Median number of patient visits per week, with change between 1970 and 1974, by geographic region and year of survey: United States, 1970 and 1974

Geographic region	Year of survey		Change,	
Geographic region	1970	1974	1970-74	
United States	Median number of patient visits 71 77		+6	
Northeast	70 69 80 71	76 79 83 72	+6 +10 +3 +1	

Table Q. Median number of patient visits per week, with change between 1970 and 1974, by age of podiatrist providing patient care and year of survey: United States, 1970 and 1974

Ago of podiatrist	Year of	Change,	
Age of podiatrist	1970	1974	1970-74
	Median number of patient visits		
5-44 years		84 100 89 68 42	+13 +16 +11 +2 +2

Table R. Median number of patient visits per week, with change between 1970 and 1974, by principal form of employment of podiatrist providing patient care and year of survey: United States, 1970 and 1974

Principal form of employment	Year of	Change,	
	1970	1974	1970-74
	Median number of patient visits		
Solo practice	70   73		+3
Partnership	84	103	+19
Group practice	89	103	+19

It is clear, however, that the major contributing factor toward the noted increase in productivity is the increased use of assistants. The importance of this factor is evident from the fact that no rise in productivity was noted for practices with a fixed number of assistants; that is to say, podiatrists with a given number of assistants in 1974 were no more productive than those with the same number in 1970, leading one to conclude that any increase in productivity could only be associated with an increased number of assistants. As shown in table S, productivity is a strong function of the number of assistants employed, but the numerical relationship has not changed fundamentally since 1970.

Table S. Median number of patient visits per week, with change between 1970 and 1974, by number of full- and part-time assistants 1 to podiatrists providing patient care and year of survey: United States, 1970 and 1974

l l		survey	Change,	
Number of assistants	1970	1974	1970-74	
	Median number of patient visits			
None	46 73 94 120	49 72 94 117	+3 -1 0 -3	

<sup>&</sup>lt;sup>1</sup>Includes both medical and nonmedical assistants.

Table T. Percent of podiatrists providing patient care with 100 patient visits or more during preceding week, with change between 1970 and 1974, by selected characteristics of podiatrist and year of survey: United States, 1970 and 1974

Selected characteristic	Year of survey		Change,
Selected characteristic	1970	1974	1970-74
	Percent of podiatrists		
United States	24.1	33.6	+9.5
Geographic region			
Northeast	22.4	33.0	+10.6
North Central	22.7 32.8	34.8 38.1	+12.1 +5.3
West	23.4	28.7	+5.3
Principal form of employment			
Solo practice	22.4	29.5	+7.1
Partnership Group practice	36.2 40.7	51.7 52.7	+15.5 +12.0

Due no doubt to the increased use of assistants, weekly productivity in excess of 100 patient visits per week has become increasingly common. In 1970, less than 1 podiatrist in 4 administered as many as 100 visits per week; by 1974, that ratio had reached 1 in 3. Substantial gains in productivity were registered in all regions and among those forms of employment shown in table T.

Because of its impact upon local and regional manpower planning, the issue of productivity takes on special significance. Realistic estimates are required not only of the productivity podiatrists have achieved in the past but also of the levels that they can reasonably reach in the face of anticipated future demand. Appendix III examines this issue in further detail, making use of special runs conducted on unpublished data from the 1974 survey. In that appendix, it is shown that average productivities well in excess of 100 patient visits per week have been achieved by podiatrists of virtually all ages, given a sufficient number of assistants. Generally speaking, older podiatrists with n + 1 assistants are seen to be essentially as productive as younger ones with n assistants. This finding has strong implications in terms of future projections of manpower need.

#### **Treatment Setting**

In 1970, the Nation's 7,078 podiatrists who administered patient care treated a weekly total of 459,285 patients. Of these, 82.7 percent were treated in the podiatrist's office, 6.3 percent in nursing homes, and the remaining 10 percent in hospitals and other settings.

In 1974, with only a handful of additional podiatrists involved in patient care (7,085 as opposed to 7,078), and with a generally shorter workweek, podiatrists managed to treat an appreciably greater volume of patients—536,732 as against 459,285.<sup>b</sup> The distribution of treatment settings, however, remained fundamentally

unchanged: Roughly 5 out of every 6 patients continued to be treated in the podiatrist's office and an additional 6 percent in nursing homes. The major change of consequence was a reduction in percent of patients treated at home and an increase in the percent treated in clinics. The relevant figures are shown in table U.

In 1974, well over 90 percent of all podiatrists provided treatment in their private offices; about a third treated patients in nursing homes. These figures have not changed substantially since 1970—however, home visits have declined and, to a lesser extent, visits conducted in clinics and on inpatients in hospitals have shown some increase (see table W).

Table U. Percent distribution of patients, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974

	Year of survey		Change,	
Treatment setting	1970	1974 <sup>1</sup>	1970-74	
	Percent distribution			
Total	100.0	100.0	• • •	
Podiatrist's office	82.7 3.3 2.8 1.9 6.3 2.2 1.0	84.2 3.1 2.3 2.9 5.9 1.0 0.6	+1.5 -0.2 -0.5 +1.0 -0.4 -1.2 -0.4	

NOTE: Numbers may not add to totals due to rounding.

1 Percentages for 1974 are based on patient visits rather than patients seen.

Table W. Percent of podiatrists providing patient care, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974

Treatment setting					
Percent of podiatrists   Podiatrist's office	Treatment setting	Year o	Change,		
Podiatrists   Podiatrists   Podiatrist's office	reatment setting	1970	1974	1970-74	
	Hospital (inpatient)	93.4 23.1 9.7 3.6 33.3	95.2 27.1 9.9 6.7 34.1	+1.8 +4.0 +0.2 +3.1 +0.8 -11.0	

bThese numbers pertain to patients seen during the week immediately preceding the survey. It is possible, therefore, that the noted increase may be due—at least in part—to seasonal factors, since the 1970 survey took place in the first calendar quarter and the 1974 survey in the last.

Table X. Median age of podiatrists providing patient care, with change between 1970 and 1974, by treatment setting and year of survey: United States, 1970 and 1974

	Year of	survey	Change,
Treatment setting	1970	1974	1970-74
Podiatrist's office	Med age podia 50.6 45.9 45.0 41.2 49.3 50.3	of	+0.1 -1.3 +1.2 -1.5 +0.2 +1.5

Treatment administered in hospitals (both in- and outpatient) and in clinics tended to be administered by podiatrists who were generally younger. The median age of podiatrists involved in each of the various treatment settings is shown in table X; again, little change is noted between 1970 and 1974.

Table Y. Number and percent distribution of patients treated during week preceding survey, by age of patient and year of survey: United States, 1970 and 1974

	Year of survey						
Age of patient	19	970	1974				
	Number	Percent distribution	Number	Percent distribution			
All ages	459,285	100.0	536,732	100.0			
16 years or under 17-64 years 65 years or over	54,207 264,287 140,791	11.8 57.5 30.7	55,889 292,847 187,996	10.4 54.6 35.0			

#### Age of Patient

Patients treated in 1974 tended to be older than patients treated in 1970. The relevant figures are shown in table Y.

The increased treatment of the elderly population may be associated with the expansion, since 1970, of podiatric benefits under Medicare.

#### REFERENCES

<sup>1</sup>National Center for Health Statistics: Preliminary data from the Survey of Podiatrists: United States, 1974. Monthly Vital Statistics Report. Vol. 24, No. 7. Supp. DHEW Pub. No. (HRA) 76-1120. Health Resources Administration. Rockville, Md., Oct. 24, 1975.

<sup>2</sup>National Center for Health Statistics: Podiatry manpower: A general profile, United States, 1974, by Kenneth Stant and Aaron Handler. *Vital and Health Statistics*. Series 14-No. 18. DHEW Pub. No. (PHS) 78-1813. Public Health Service. Washington. U.S. Govern-

ment Printing Office, Oct. 1978.

<sup>3</sup>National Center for Health Statistics: Podiatry workforce: Characteristics of the provision of patient care, United States, 1974, by P. Hannah Davis Zytnick and Kenneth Stant. *Vital and Health Statistics*. Series 14-No. 22. Public Health Service. Washington. U.S. Government Printing Office. In preparation.

<sup>4</sup>National Center for Health Statistics: Podiatry manpower: A general profile, United States, 1970, by Hugo K. Koch and Hazel M. Phillips. Vital and Health Statistics. Series 14-No. 10. DHEW Pub. No. (HRA) 74-1805. Health Resources Administration. Washington. U.S. Government Printing Office, Aug. 1973.

<sup>5</sup>National Center for Health Statistics: Podiatry manpower: Characteristics of clinical practice, United States, 1970, by Hugo K. Koch and Hazel M. Phillips. *Vital and Health Statistics*. Series 14-No. 11. DHEW Pub. No. (HRA) 74-1806. Health Resources Administration. Washington. U.S. Government Printing Office, Mar. 1974.

<sup>6</sup>National Center for Health Statistics: Characteristics of patients treated by podiatrists, United States, 1970, by Hugo K. Koch and Hazel M. Phillips. *Vital and Health Statistics*. Series 14-No. 14. DHEW Pub. No. (HRA) 75-1809. Health Resources Administration. Washington. U.S. Government Printing Office, Aug. 1974.

<sup>7</sup>Greenberg, L.: A Proposed Demand-Productivity Model for the Designation of Podiatric Manpower Shortage Areas. Prepared for the Bureau of Health Manpower, Health Resources Administration, Washington, D.C., Jan. 1977.

# LIST OF DETAILED TABLES

1.	Number of podiatrists providing patient care, by age of podiatrist and geographic area of practice: United States, 1970 and 1974	17
2.	Number of podiatrists under 45 years and 65 years and over providing patient care and ratio between the two age groups, by geographic area of practice and year of survey: United States, 1970 and 1974	18
3.	Number of podiatrists providing patient care per 100,000 population and change in ratio between 1970 and 1974, by geographic area of practice and year of survey: United States, 1970 and 1974	19
4.	Number and percent of female podiatrists and percent of all podiatrists providing patient care, by age of podiatrist and year of survey: United States, 1970 and 1974	19
5.	Percent distribution of podiatrists providing patient care, by principal form of employment, age of podiatrist, and year of survey: United States, 1970 and 1974	20
6.	Percent of podiatrists providing patient care who employ full- or part-time assistants, by selected characteristics of podiatrist, year of survey, and number of assistants: United States, 1970 and 1974	21
7.	Number and percent of podiatrists providing patient care, with change between 1970 and 1974, by selected patient services:  United States, 1970 and 1974	22
8.	Percent of podiatrists providing patient care, by age of podiatrist, year of survey, and selected services provided: United States, 1970 and 1974	23
9.	Percent of podiatrists who devoted 35 hours or more to patient care during preceding week, with change between 1970 and 1974, by selected characteristics of podiatrist: United States, 1970 and 1974	24
10.	Median number of patient visits per week, with change between 1970 and 1974, by selected characteristics of the podiatrists providing patient care and year of survey: United States, 1970 and 1974	25

Table 1. Number of podiatrists providing patient care, by age of podiatrist and geographic area of practice: United States, 1970 and 1974

				<del></del>	<del></del>			···				
			19	970					19	74		
Geographic area of practice	Total	Under 35 years	35-44 years	45-54 years	55-64 years	65 years or over	Total	Under 35 years	35-44 years	45-54 years	55-64 years	65 years or over
		Number of podiatrists										
United States	7,078	944	1,460	2,030	1,925	718	7,085	1,296	1,156	1,897	1,867	869
Geographic region  Northeast  North Central  South  West  Geographic division	2,991 2,059 989 1,038	296 279 175 193	533 463 239 225	894 572 299 265	967 515 192 251	301 230 83 104	2,876 1,968 1,135 1,105	423 332 298 242	356 336 230 233	737 604 297 259	949 428 232 258	411 268 78 112
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central Mountain	697 2,295 1,698 361 588 115 286 207 831	33 263 247 33 106 11 58 34 159	133 400 383 80 151 15 73 50	213 681 465 107 171 48 79 46 219	242 725 420 95 120 22 51 49 202	76 226 183 47 40 19 24 28 76	621 2,255 1,636 333 701 119 315 228 877	51 372 296 36 196 27 75 59	61 295 282 55 146 15 69 50	172 564 497 107 174 35 88 51 209	237 713 345 83 147 26 59 48 210	100 311 216 52 38 15 24 20 92

NOTE: Numbers may not add to totals due to rounding.

Table 2. Number of podiatrists under 45 years and 65 years and over providing patient care and ratio between the two age groups, by geographic area of practice and year of survey: United States, 1970 and 1974

Geographic area of practice and year of survey	Number of podiatrists under 45 years (A)	Number of podiatrists 65 years or over (B)	Ratio of (A) to (B)
Geographic region			
Northeast:		ļ	<b> </b>
1970	829	301	2.8
	779	411	1.9
North Central: 1970	742	230	3.2
	668	268	2.5
South: 1970	414	83	5.0
	528	78	6.8
West: 1970 1974	418	104	4.0
	475	112	4.2
Geographic division			
New England:	İ		
1970	166	76	2.2
1974	112	100	1.1
Middle Atlantic:	663	226	2.9
1970	667	311	2.1
East North Central: 1970	630	183	3.4
	578	216	2.7
West North Central: 1970	113	47	2.4
	91	52	1.7
South Atlantic:	257	40	6.4
1970	342	38	9.0
East South Central: 1970	26	19	1.4
	42	15	2.8
West South Central: 1970	131	24	5.5
	144	24	6.0
Mountain: 1970	84	28	3.0
	109	20	5.4
Pacific: 1970	334	76	4.4
	366	92	4.0

Table 3. Number of podiatrists providing patient care per 100,000 population and change in ratio between 1970 and 1974, by geographic area of practice and year of survey: United States, 1970 and 1974

	Year of	Year of survey		
Geographic area of practice	1970	1974	1970-74	
	Numl podia	per of		
United States	3.5	3.4	0.1	
Geographic region				
Northeast North Central	6.1 3.7 1.6 3.0	5.8 3.4 1.7 3.0	-0.3 -0.3 +0.1 0.0	
Geographic division				
New England	5.9 6.2 4.2 2.2 1.9 0.9 1.5 2.5 3.1	5.1 6.0 4.0 2.0 2.1 0.9 1.5 2.4 3.2	-0.8 -0.2 -0.2 -0.2 +0.2 0.0 0.0 -0.1 +0.1	

Table 4. Number and percent of female podiatrists and percent of all podiatrists providing patient care, by age of podiatrist and year of survey: United States, 1970 and 1974

Age of podiatrist and year of survey	Number of female podiatrists	Percent of all female podiatrists	Percent of all podiatrists (male plus female)
Under 35 years:			
1970	9	2.9	1.0
1974	12	4.4	0.9
35-44 years:			
1970	31	10.0	2.1
1974	11	4.1	0.9
45-54 years:			
1970	90	28.6	4.4
1974	75	27.7	4.0
55-64 years:			
1970	113	35.9	5.9
1974	105	38.7	5.6
65 years or over:			
1970	72	22.9	10.0
1974	68	25.1	7.8

Table 5. Percent distribution of podiatrists providing patient care, by principal form of employment, age of podiatrist, and year of survey: United States, 1970 and 1974

Age of podiatrist and year of survey	Total	Solo practice	Partnership and group practice	Salaried and other
		Percent	distribution	
Under 35 years:				
1970	100.0	61.5	16.9	21.6
1974	100.0	60.1	32.6	7.3
07.44		Į		
35-44 years:	100 0	00.5	00	
1970 1974	100.0 100.0	86.5 75.9	9.2 21.0	4.2 3.1
17/4,	100.0	75.5	21.0	3.1
45-54 years:				ļ
1970	100.0	88.1	7.2	4.8
1974	100.0	85.8	11.3	3.0
55-64 years: 1970	100.0	91.2	5.5	3.3
1974	100.0	87.9	9.5 9.7	2.3
10/7	100.0	37.5	9.,	2.5
65 years or over:		}		
1970	100.0	92.0	5.4	2.6
1974	100.0	91.2	6.9	1.8

Table 6. Percent of podiatrists providing patient care who employ full- or part-time assistants, by selected characteristics of podiatrist, year of survey, and number of assistants: United States, 1970 and 1974

	Num	nber of assista	ants	
Selected characteristic and year of survey	1 or more full-time	1 or more part-time	2 or more full-time	
	Perce	Percent of podiatrist		
United States: 1970	47.5		400	
1974	47.5 48.3	32.4 43.5	13.0 23.4	
Age of podiatrist				
Under 35 years:				
1970 1974	55.1 65.0	40.4 56.4	18.5 34.0	
35-44 years:				
1970 1974	60.5 64.4	45.7 56.4	20.2 37.3	
45-54 years:				
1970 1974	51.5 51.5	34.9 44.2	13.9 24.7	
55-64 years:				
1970 1974	39.0 37.4	22.3 35.1	7.5 14.2	
65 years or over:				
1970 1974	22.4 18.6	14.6 23.8	3.9 6.2	
Geographic region				
Northeast:		Ì		
1970 1974	33.9 34.0	29.2 42.5	7.1 14.4	
North Central:				
1970	51.2	35.3	13.9	
1974	51.0	45.4	24.6	
South:				
1970 1974	68.9 67.7	32.4 43.2	27.0 37.6	
West:				
1970	58.9	35.8	15.2	
1974  Principal form of employment	61.1	43.2	30.5	
Solo practice:				
1970 1974	45.1 42.4	31.5 41.4	10.0 16.2	
Partnership:				
1970 1974	78.8 77.4	51.4 57.5	39.7 59.1	
Group practice:				
1970	83.0	47.2	44.2	
1974	75.4	50.1	52.7	

 $<sup>^{1}</sup>$ Includes both medical and nonmedical assistants.

Table 7. Number and percent of podiatrists providing patient care, with change between 1970 and 1974, by selected patient services: United States, 1970 and 1974

Patient service	19	70	19	74	Change,
Factorit solvice	Number	Percent	Number	Percent	1970-74
Palliative services	6,921	97.8	6,925	97.8	0
Orthopedic services	6,386 6,187	90.2 87.4	6,484 6.361	91.5 89.8	+1.3
Prescription of drugs	5,686	80.3	5.840	89.8 82.4	+2.4 +2.1
Physical therapy treatmentX-ray services	5,593	79.0	5,848	82.7	+3.6
Office surgery	5,437	76.8	5,719	80.7	+3.9
Whirlpool baths	4,976	70.3	5,075	71.6	+1.3
Ultrasonic treatment	4,524 3 <i>.</i> 703	63.9 52.3	4,825 3,687	68.1 52.0	+4.2
Low-voltage treatment	2,584	36.5	2.323	32.8	-0.3 -3.7
Hospital surgery	2,148	30.3	2,788	39.4	+9.1
Ultraviolet lamp treatment	2,123	30.0	2,124	30.0	0
Diathermy	2,046	28.9	1,779	25.1	-3.8

Table 8. Percent of podiatrists providing patient care, by age of podiatrist, year of survey, and selected services provided: United States, 1970 and 1974

		1970 and 1974		
And of modification and		Percent of	podiatrists	
Age of podiatrist and year of survey	ALMOST ALL (More than 90 percent)	MOST (60-90 percent)	MANY (30-60 percent)	SOME (Less than 30 percent)
Under 35 years:		Services p	provided	
1970	Palliative services Office survery Prescription of drugs Physical therapy treatment Orthopedic services X-ray services	Hospital surgery Whirlpool baths Ultrasonic treatment	Fitting special shoes	Diathermy Low-voltage treatment Ultraviolet lamp treatment
1974	A:	s above, except "hospital surge	ery" went from MOST to MAN	IY.
35-44 years: 1970	Palliative services Office surgery Prescription of drugs Physical therapy treatment Orthopedic services X-ray services	Whirlpool baths Ultrasonic treatment	Fitting special shoes Hospital surgery Ultraviolet lamp treatment	Diathermy Low-voltage treatment
1974	As ab	ove, except "low-voltage treat	ment" went from SOME to M	ANY.
45-54 years: 1970	Palliative services Prescription of drugs Orthopedic services	Office surgery Physical therapy treatment X-ray services Whirlpool bath Ultrasonic treatment	Fitting special shoes Hospital surgery Ultraviolet lamp treatment Low-voltage treatment	Diathermy
1974	As	s above, except "hospital surge	ry" went from MANY to SOM	1E.
55-64 years: 1970	Palliative services	Office surgery Prescription of drugs Physical therapy treatment Orthopedic services Whirlpool baths X-ray services	Fitting special shoes Ultraviolet lamp treatment Low-voltage treatment Ultrasonic treatment	Diathermy Hospital surgery
1974	As above,		ment" went from MANY to Som SOME to MANY.	OME, and
65 years or over: 1970	Palliative services	Prescription of drugs Orthopedic services	Fitting special shoes Ultrasonic treatment Office surgery Physical therapy treatment Whirlpool baths X-ray services	Diathermy Hospital surgery Ultraviolet lamp treatment Low-voltage treatment
1974	As at	oove, except "prescription of c	drugs" went from MOST to MA	ANY.

Table 9. Percent of podiatrists who devoted 35 hours or more to patient care during preceding week, with change between 1970 and 1974, by selected characteristics of podiatrist: United States, 1970 and 1974

Selected characteristic	1970	1974	Change, 1970-74
		ent of atrists	
United States	69.9	68.1	-1.8
Geographic region			
Northeast	69.3 69.5 73.8 68.8	69.1 66.9 71.3 64.6	-0.2 -2.6 -2.5 -4.2
Age			
Under 35 years	69.0 74.4 74.7 71.1 45.4	75.0 72.1 72.9 68.6 41.4	+6.0 -2.3 -1.8 -2.5 -4.0
Principal form of employment			
Solo practice	70.0 74.6 80.5 39.7	66.8 74.7 74.2 67.9	-3.2 +0.1 -6.3 +28.2

Table 10. Median number of patient visits per week, with change between 1970 and 1974, by selected characteristics of the podiatrist providing patient care and year of survey: United States, 1970 and 1974

Selected characteristic		Year of survey	
		1974	Change, 1970-74
	Median number of patient visits		
United States	71	77	+6
Geographic region			
Northeast	70 69 80 71	76 79 83 72	+6 +10 +3 +1
Age			
Under 35 years	71 84 78 66 40	84 100 89 68 42	+13 +16 +11 +2 +2
Principal form of employment			
Solo practice	70 84 89	73 103 103	+3 +19 +19

# **APPENDIXES**

#### **CONTENTS**

I.	Description of Survey Methodology  Background: 1974 Survey of Licensed Podiatrists  Data Collection  Weighting Factors			
II.	Definitions	30		
III.	Productivity as Related to Use of Auxiliary Personnel, for Various Age Groups	32		
IV.	Facsimiles of Survey Questionnaires	36 40		
	LIST OF APPENDIX TABLES			
L	Number and percent distribution of the podiatric population surveyed, by type of response: United States, 1974	27		
и.	Distribution by State of responding podiatrists and application of inflation factor: United States, 1974	28		
III.	Item nonresponse rates experienced in 1974 Survey of Licensed Podiatrists	29		
IV.	Average number of patient visits per week, standard deviation, and number of podiatrists providing patient care, by number of full- and part-time assistants employed and age of podiatrist:  United States, 1974	33		
V.	Average number of patient visits per week, standard deviation, and number of podiatrists providing patient care, by number of full-time assistants employed and age of podiatrist: United States, 1974	34		
VI.	Average number of patient visits per week, by age of podiatrist and assistants employed: United States, 1974	35		

#### APPENDIX I

#### DESCRIPTION OF SURVEY METHODOLOGY

# Background: 1974 Survey of Licensed Podiatrists

The 1974 Survey of Licensed Podiatrists was conducted from October through December 1974 by NCHS in cooperation with the American Podiatry Association. Informatics, Inc., of Rockville, Md., was responsible for the collection, editing, processing, and tabulating of data obtained from the survey. A similar survey of the Nation's licensed podiatrists was conducted by NCHS in 1970. Informatics developed, tested, and implemented procedures to computer print onto the 1974 survey questionnaires responses to five questions reported by the respondent during the previous 1970 Survey of Podiatrists. Although all analyses in this report stem from the data collected by the contractor, all analyses were performed by the author.

A self-administered questionnaire was mailed in autumn of 1974 to all licensed podiatrists in the United States. The 1974 survey's mailing list was derived from the 1970 survey's mailing list with the addition of graduates of podiatry colleges between 1970 and 1973. This mailing list was then updated by the deletion of podiatrists known to have died as well as any duplicate listings of podiatrists.

#### **Data Collection**

The initial mailing list consisted of 8,763 podiatrists. A total of 8,261 podiatrists remained after eliminating names of the deceased; the duplicates discovered after mailing; and a few potential subjects who were out of scope of the survey because they were no longer licensed, had left the United States, or had been mistakenly assumed to be podiatrists. A further

elimination of refusals, postmaster returns, and other nonresponses reduced the usable universe to 7,253 "good" responses (table I).

#### Weighting Factors

In order to duplicate the total universe of podiatrists as it would have appeared had there been no refusals, postmaster returns, or other nonresponses, a weighting or "inflation" factor was established for each State from the ratio of total podiatrists in that State (excluding deceased and those out of scope of the survey) to the number of usable (good) responses obtained (see table II). Within each State the computerized record for each "good-response" podiatrist received the same weight. When all the weighted good-response records were cumulated, they yielded after rounding, a weighted national figure of 8,261 for total active and inactive podiatrists. In a similar manner, an estimate of 7,120 was derived for podiatrists who were active in their profession in 1974. Of the 7,120 goodresponse podiatrists, 7,085 reported that they

Table I. Number and percent distribution of the podiatric population surveyed, by type of response: United States, 1974

Type of response	Number	Percent distri- bution
All podiatrists surveyed excluding those deceased and out of scope	8,261	100.0
Response	7,253 133 334 541	87.8 1.6 4.1 6.5

Table II. Distribution by State of responding podiatrists and application of inflation factor: United States, 1974

State	Number of responding podiatrists	Weighting factor	Weighted number of podiatrists
United States	7,253	1.14	8,261
Alabama	20	1.35	27
Alaska	1	3.00	3
Arizona	74	1.05	78
Arkansas	21	1.05	22
California	815	1.14	929
Colorado	67	1,21	81
Connecticut	181	1.11	201
Delaware	19	1.05	20
District of Columbia	42	1.29	54
Florida	331	1.10	364
Georgia	69	1.17	81
Hawaii	5	1,60	8
Idaho	17	1.06	18
Illinois	583	1.17	682
Indiana	140	1.06	148
lowa	87	1,11	97
Kansas	48	1.08	52
Kentucky	63	1.06	67
Louisiana	35	1.14	40
Maine	19	1.11	21
Maryland			
Mareaphuratte	120	1.18	142
Massachusetts	380	1.16	441
Michigan	289	1.11	321
Minnesota	78	1.03	80
Mississippi	9	1.22	11
Missouri	85	1.13	96
Montana	13	1.08	14
Nebraska	39	1.05	41
Nevada	16	1.06	17
New Hampshire	26	1.15	30
New Jersey	365	1.12	409
New Mexico	24	1.29	31
New York	1,159	1.18	1,368
North Carolina	54	1.06	57
North Dakota	5	1.00	5
Ohio	489	1.15	562
Oklahoma	45	1.18	53
Oregon	42	1.02	43
Pennsylvania	668	1.14	762
Rhode Island	53	1.13	60
South Carolina	14	1.29	18
South Dakota	14	1.00	14
Tennessee	41	1.10	45
Texas	205	1.18	242
Utah	32	1.06	34
Vermont	7	1.14	8
Virginia	81	1.07	87
Washington	74	1.04	77
West Virginia	41	1.10	45
Wisconsin	140	1.06	148
Myoming	8	1.13	9
	•	1.13	3

usually spent 1 hour or more a week in patient care. This figure is the statistical base for the tables and the textual commentary that appear in this report.

Numbers in this report have been independ-

ently rounded and may not add to totals. Percents also have been independently rounded and may not always add to 100.0. Percents and rates were calculated on the basis of original, unrounded figures and will not necessarily agree

Table III. Item nonresponse rates experienced in 1974 Survey of Licensed Podiatrists

	Question number and subject	Number of respondents to whom question applied	Number of podiatrists not responding	Item nonresponse rate (percent)
1. 2. 3a. 3b. 4. 5. 6. 7.	Year of birth Sex	7,253	2 1 4 7 114 876 155 18	0.03 0.01 0.06 0.10 1.57 12.08 2.14 0.25 0.00
9. 10.	Hours per week in all podiatric activities	} 6,248	152 —	2.43 0.00
11a. 11b. 12. 13a. 13b. 14.	Primary activity	6,217	14 35 38 9 26 7 346	0.23 0.56 0.61 0.14 0.42 0.11 5.57
16a. 16b. 16c. 16d. 16e. 17a. 17b. 17c. 18a.	Hours providing patient care last week Patients seen last week Age of patients seen last week Patient visits last week Type of setting for patient visits last week Hospital residency program Clinic residency program Preceptorship program Hospital privileges Clinic privileges	6,248	29 87 43 81 34 95 118 132 70 323	0.46 1.39 0.69 1.30 0.54 1.52 1.89 2.11 1.12 5.17

with the percents and rates calculated from rounded data.

In order to compensate for partial nonresponse within the questionnaire, that is, leaving individual items unanswered, a second type of adjustment was applied to the data as received. In such cases, omitted items were randomly

assigned the response obtained from respondents with similar characteristics, and the total figure for the item was adjusted to include this "imputation." As may be seen in table III, the need for this kind of adjustment was minimal. The item nonresponse rate was less than 2 percent for all except six items on the questionnaire.

#### APPENDIX II

#### DEFINITIONS

Age.—Age refers to the respondent's age in 1970 and 1974. In all cases, age is calculated as the difference between 1970 or 1974 and the respondent's year of birth.

Active and inactive podiatrists.—For the purposes of the 1974 Survey of Licensed Podiatrists, practitioners who spent 1 hour or more each week in providing patient care or were engaged in another podiatric activity such as teaching and podiatric research were considered to be active podiatrists. Also included in the group of active podiatrists were practitioners who were temporarily not active at the time of the survey owing to short-term illness or injury, vacation, and so forth. Inactive podiatrists were defined as those practitioners who failed to meet the criteria for either of the above categories (see appendix IV, question 8 of 1974 questionnaire).

Principal form of employment.—Two general categories of employment may be identified from the survey data: self-employed and salaried. In addition, several specific types of employment may be identified within each of the two major categories.

A self-employed podiatrist may also be categorized according to one of the following types of self-employment:

A solo practitioner is a podiatrist working with or without assistants but not in conjunction with another health professional who can independently treat patients for podiatric or nonpodiatric ailments.

A partnership practitioner is one of two or more podiatrists who conjointly provide podiatric services only.

A group practitioner is a podiatrist conjointly working with at least one person in

another health profession who can independently treat patients for nonpodiatric ailments.

Salaried podiatrists could check 1 of 7 sources of their salary (see questionnaire). Because only a small number of podiatrists completed this section, for the purpose of this report they were grouped together.

For explanatory notes regarding the various principal types of employment, see question 14 of the 1974 questionnaire in appendix IV.

Geographic area.—For the purpose of reporting the data yielded by the 1974 podiatry survey, the United States (the 50 States and the District of Columbia) is divided into the geographic regions and divisions used by the U.S. Bureau of the Census and into 10 Standard Federal Administrative Regions.

Geographic region and division

States included

#### Northeast

New England ........... Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut

Middle Atlantic ...... New York, New Jersey, Pennsylvania

#### North Central

East North Central ... Ohio, Indiana, Illinois, Michigan, Wisconsin

West North Central .. Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, Kansas

South		Region III (Phila-	
South Atlantic	Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina,		District of Columbia, Del- aware, Maryland, Penn- sylvania, ·Virginia, West Virginia
	Georgia, Florida	Region IV (Atlanta).	Alabama, Florida, Geor-
East South Central	Kentucky, Tennessee, Alabama, Mississippi		gia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee
West South Central . West	. Arkansas, Louisiana, Oklahoma, Texas	Region V (Chicago)	Illinois, Indiana, Minne- sota, Michigan, Ohio, Wis-
	3.5		consin
Mountain	Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada	Region VI (Dallas- Fort Worth)	Arkansas, Louisiana, New Mexico, Oklahoma, Texas
Pacific	Washington, Oregon, Alaska, California, Hawaii	Region VII (Kansas City)	Iowa, Kansas, Missouri, Nebraska
Standard Federal		- · · · · · · · · · · · · · · · · · · ·	
Administration Region with head- quarters city	States included	Region VIII (Denver)	.Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming
Region I (Boston)Con			, , , , ,
	husetts, New Hamp- re, Rhode Island, Ver- nt	Region IX (San Francisco)	- .Arizona, California, Ha- waii, Nevada
Region II (New York)Nev	w York, New Jersey	Region X (Seattle)	.Alaska, Idaho, Oregon, Washington

#### APPENDIX III

# PRODUCTIVITY AS RELATED TO USE OF AUXILIARY PERSONNEL, FOR VARIOUS AGE GROUPS

Data from the 1974 Survey of Licensed Podiatrists<sup>7</sup> were subjected to special computer runs in which the mean productivity of podiatrists of various age groups, employing varying numbers of assistants, was calculated.

The following cell intervals were defined for the two independent variables:

### Age:

Under 35 years

35-44 years

45-54 years

55-64 years

65 years or over

Number of assistants:

None

One

Two

Three or more

For each cell, the dependent variable "mean productivity" was defined as the average number of patient visits conducted during the preceding week by podiatrists with the specified cell characteristics.

The results of these calculations are shown in table IV for the case of full- and part-time assistants combined, and in table V for full-time assistants only. The cells in both tables contain the following entries:

- P = The mean productivity characteristic of podiatrists within that cell.
- $\sigma_P$  = The standard deviation of P.
- N = The number of podiatrists (nationwide) included within each cell.

NOTE: A list of references follows the text.

Tables IV and V confirm that productivity varied sharply with both the age of the podiatrist and the number of assistants employed. Several additional features of these tables, however, are particularly noteworthy:

- 1. Despite the clearcut relevance of age, categories of older podiatrists with a given number of assistants are generally seen to be more productive than podiatrists in up to 3 age categories younger with just one assistant less. Several examples (see table VI), culled from table V, serve to illustrate this point. It would appear, therefore, that age is not an insurmountable barrier to high productivity. Given adequate demand, podiatrists could, if they chose, close the productivity gap simply by hiring an additional assistant.<sup>c</sup>
- 2. A second feature that warrants comment is that productivity is highly variable,

cThis statement contains two important qualifiers: "given adequate demand" and "if they chose." The first qualifier denotes simply that productivity can be pushed no further than local demand will carry it. The second qualifier implies that not all podiatrists (or other providers for that matter) are necessarily motivated to match that demand. Certainly, among older practitioners, the economic incentive characteristic of younger persons may be expected to have tapered off; this, perhaps more than anything else, may account for the drop in productivity noted among self-employed podiatrists starting at age 55, whereas those who are salaried are seen to maintain high productivity through age 64.

Table IV. Average number of patient visits per week, standard deviation, and number of podiatrists providing patient care, by number of full- and part-time assistants<sup>1</sup> employed and age of podiatrist: United States, 1974

	Nun	All podiatrists			
Age of podiatrist and descriptive statistics	0	1	2	3 or more	combined
All ages combined:	50.7	74.2	93.5	123.3	83.4
P	36.3	38.7	43.2	68.4	54.3
σ <sub>P</sub> N	1,927	2,045	1,420	1,692	7,085
Under 35 years:					
P	68.1	66.8	84.3	115.4	90.2
σ <sub>p</sub>	62.1	40.9	38.5	66.1 503	58.5
N	109	357	327	503	1,296
35-44 years:	<b>l</b>				
P	67.7	81.4	101.2	128.0	104.0
σ <b>p</b>	36.2	45.3	49.2	60.8	57.3
N	108	284	298	466	1,156
45-54 years:					
P	59.5	82.4	99.2	132.2	92.5
σρ	37.8	37.6	41.6	57.1	52.5
Ń	462	549	436	450	1,897
55-64 years:					
P	51.6	73.3	93.1	119.6	73.7
g <sub>p</sub>	31.6	33.6	41.9	71.6	47.8
Ń	718	632	287	230	1,867
65 years or over:	ļ				
P	34.8	59.7	71.3	86.0	46.8
σ <b>ρ</b>	26.1	34.6	34.3	54.5	35.6
Ń	531	224	73	42	869

<sup>&</sup>lt;sup>1</sup>Includes both medical and nonmedical assistants.

NOTES: P = mean number of patient visits per week.

 $\sigma_P$  = standard deviation of P, for podiatrists within the cell in question. N = number of podiatrists (nationwide) included within that cell.

Numbers may not add to totals due to rounding.

even among podiatrists of like characteristics. Of the 20 interior cells (i.e., those which do not display row or column totals) in table V fully half show standard deviations greater than 50.d Standard deviations this high hamper one's ability to make meaningful manpower projections for limited geographic areas. This is

especially true at the county level, since 96 percent of the counties that have podiatrists at all, have less than 10 podiatrists. Since the precision of a sample varies with the square root of the sample size, it follows that given a standard deviation of (say) 50 and a sample size of 9, the standard error of the resulting productivity estimate is

$$\frac{50}{\sqrt{9}}$$
 = 16.7 visits per week.

This means that for 85 percent of the counties in the United States, any estimate of productivity based on the age distribution of the podiatrists who prac-

dStandard deviations based (as these are) on 1 week's data can be misleading, since an otherwise active podiatrist on vacation or attending a professional meeting during the week in question will create the illusion of higher variability than would be noted over an extended period of time. There is no way of judging the magnitude of this phenomenon but its likely presence should be noted.

Table V. Average number of patient visits per week, standard deviation, and number of podiatrists providing patient care, by number of full-time assistants<sup>1</sup> employed and age of podiatrist: United States, 1974

	Number	All podiatrists			
Age of podiatrist and descriptive statistics	0	1	2	3 or more	combined
All ages combined:					
P	64.2 43.4	89.4 45.2	109.3 48.5	130.9 76.7	83.4 54.3
ν	3,660	1,766	888	771	7,085
Under 35 years:	ĺ				
P	75.8	84.9	99.4	119.5	90.2
σ <sub>p</sub>	51.4	50.9	46.9	75.2	58.5
Ň	453	401	214	228	1,296
35-44 years:					
P	85.8	99.2	118.5	131.2	104.0
σ <b>ρ</b>	51.7	53.2	54.1	60.1	57.3
Ń	412	313	215	216	1,156
45-54 years:					
P	73.5	94.3	114.3	145.3	92.5
σ <sub>P</sub>	43.8	39.4	46.8	66.5	52.5
Ň	920	509	263	205	1,897
55-64 years:				:	
P	60.3	83.8	105.9	134.6	73.7
σ <sub>D</sub>	35.8	38.0	43.7	52.0	47.8
Ń	1,169	434	167	97	1,867
65 years or over:					
P	38.6	76.9	89.0	99.7	46.8
σρ	27.3	40.6	33.3	67.9	35.9
Ń	707	108	29	25	869

<sup>&</sup>lt;sup>1</sup>Includes both medical and nonmedical assistants.

NOTES: P = mean number of patient visits per week.  $\sigma_P = \text{standard deviation of } P, \text{ for podiatrists within the cell in question.}$  N = number of podiatrists (nationwide) included within that cell.

Numbers may not add to totals due to rounding.

tice in that county, and the number of assistants they employ, is characterized by a 2-standard deviation (95 percent) confidence interval of at least ±33 visits

per week, or about 1,500 per year. For counties with less than 9 podiatrists, the width of the confidence interval is correspondingly greater.

Table VI. Average number of visits per week, by age of podiatrist and assistants employed: United States, 1974

Example and age of podiatrist	Average number of patient visits per week
Example I	
Younger podiatrists with <i>no</i> full-time assistants: Under 35 years	75.8 85.8 73.5
Older podiatrists with <i>one</i> full-time assistant: 55-64 years	83.8 76.9
Example 2	
Younger podiatrists with <i>one</i> full-time assistant: Under 35 years	84.9 99.2 94.3
Older podiatrists with <i>two</i> full-time assistants: 55-64 years	105.9 89.0
Example 3	
Younger podiatrists with two full-time assistants:  Under 35 years	99.4 118.5 114.3
Older podiatrists with three full-time assistants: 55-64 years	<sup>1</sup> 121.7 <sup>1</sup> 117.7

<sup>&</sup>lt;sup>1</sup>These numbers will not be found in table V because the column heading in that table pertains to three or *more* (rather than exactly three) assistants. The numbers in question are derived from the original computer printout on which table V was based.

# APPENDIX IV FACSIMILES OF SURVEY QUESTIONNAIRES

## 1970 Survey Questionnaire

Form Approved Budger Hureau No. 68-569063 Approval Expires March 31, 1970	HSM-353 12-69  DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION NATIONAL CENTER FOR HEALTH STATISTICS  CONFIDENTIAL: All information which permits the identification of the individual will be held strictly confidential, will be used solely by persons engaged in, and only for the purposes of the survey and will not be disclosed or released to other persons or for any other purpose.
	SURVEY OF PODIATRISTS
1. Is your name correct, and is the address above your PRIMA	I RY PLACE OF PRACTICE?
1 🗀 Yes z 🗀 🔒 No	
If no, please enter the correct	information below:
Name: First	_
Primary place of practice: Numb	er Street
City	State Zip Code
2. In what year were you born?	State Zip Code
Year	
3. Where were you born? State or foreign country	<del></del>
4. Are you a citizen of the United States? (Please check appr	opriate box)
1  Yes, Native born 2  Yes, Naturalized 3  No	
5. Sex: 1  Male 2  Female	
6. A. From which college of podiatry did you graduate?	
Name of college	
State	
B. When did you graduate?	<del></del> ;
7. What degrees have you earned OTHER THAN your degree in	podietry? (Check each box that applies)
Doctorate (Ph.D., Ed.D., etc.) Bache	or's

8.	is which States do you currently hold a license to practice podiatry?
_	
9.	How many years have you been active in podiatry? (Include patient care, teaching, research, and administration. Exclude years spent in non-podiatric activities or retirement.)
	Number of years
10.	Are you <b>CURRENTLY ACTIVE</b> in podiatry? (Include patient care, teaching, research, and administration)
	Yes, Full-time No, Not active in podiatry but not retired
	Yes, Part-time  A  No, Retired  No, Retired
	PROCEED to Question 11.  STOPI If you are not currently active in podiatry, remainder of questionnaire does not apply. Please return questionnaire in the envelope provided.
11.	Which of the following categories best describes your PRINCIPAL form of employment? (Check one)
	Self-employed - Solo practice   Self-employed - Partnership practice   Self-employed - Group practice   Employed by - Military
	<ul> <li>Employed by - Federal government (non-military)</li> <li>Employed by - State or local government</li> </ul>
	<ul> <li>☐ Employed by — Non-government organization or institution</li> <li>☐ Employed by — Other podiatrist</li> <li>☐ Other (Specify:</li></ul>
12.	How many <u>WEEKS</u> were you active in podiatry during calendar year 1969? (Include patient care, teaching, research, and administration. Do not count vacations as weeks worked.)
	Weeks per year
13.	APPROXIMATELY how many hours per week do you usually spend in each of the following podiatric activities?
	hrs. Patient care (Include office work connected with the care of your patients) hrs. Teaching in a college of podiatry
	hrs. Podiatry research
	hrs. Administration (Podiatry associations, college administration, etc.) hrs. Other podiatric activity Total hours per week
14.	Do you spend any hours per week in the category "Patient care" in question 13a. above?
	Yes, I spend <u>some</u> hours 2 No, I spend <u>no</u> hours in patient care.
	PROCEED to Question 15.  STOP: If no hours are spent in patient care, remainder of questionnaire does not apply. Please re- turn questionnaire in the envelope provided.

15. When providing patient care, which of the services below (Check all that apply)	are rendered to your patients by you or under your direction?
□ Ballissiva saminas	
<ul> <li>□ Palliative services</li> <li>□ Hospital surgery</li> </ul>	
☐ Office surgery	
Prescription of drugs	
Physical therapy treatment	
Orthopedic services	
☐ Whirlpool baths	
☐ Fitting of special shoes	
X-ray services	
☐ Ultrasonic treatment	
☐ Diathermy	
☐ Low-voltage treatment	
Ultra-violet lamp treatment	
Other (Specify:	
<ol> <li>In your principal form of employment, do you employ offic receptionists, secretaries, technical assistants, nurses, e</li> </ol>	e assistants other than podiatrists to assist you? (Include etc.)
1 Yes 2 No	
Please indicate the <u>NUMBER</u> of full-time and part-t	time office assistants employed by you.
a. Number of FULL-TIME assistants(35 hours or more per ueek)	
b. Number of PART-TIME assistants (Less than 35 hours per ueek)	
17. During your hours spent in patient care, what do you cons	ider to be your PRIMARY, and your SECONDARY activity?
A. PRIMARY activity: (Check one)	B. SECONDARY activity: (Check one)
1  General practice	1 🔲 General practice
2 Surgery	2 Surgery
₃ ☐ Podogeriatrics	Podogeriatrics
♣ ☐ Podopediatrics	₄ ☐ Podopediatrics
5 🗀 Podiatric dermatology	5 Dodiatric dermatology
6 🖂 Roentgenology	6 🖂 Roentgenology
7 🖂 Foot orthopedics	7 Foot orthopedics
s □ Other (Specify:)	• 🗆 Other (Specify:)
	9 🖂 None
18. In your PODIATRY PRACTICE, how many hours did you	spend in patient care <u>LAST</u> week?
hours	

	of visits last week		
APPROXIMATELY how mo counted only once.)	any different <u>PATIENTS</u> do	ses this represent? (Paties	nts with multiple visits shou
Approximate number of	patients last week		
A. Of these PATIENTS,	, what is the APPROXIMA	TE <u>NUMBER</u> in the followi	ng age and sex categories?
		MALE PATIENTS LAST WEEK:	FEMALE PATIENTS LAST WEEK:
Number 16	years old or under:		
Number fro	m 17 to 64 years old:		
Number 65	years old or over:	-	
	I and approximate		
B. Of these PATIENTS,	what is the APPROXIMA	TE <u>NUMBER</u> treated in the	following settings?
	Number in private office		following settings?
	Number in private office Number in hospital ( <i>Inputie</i> Number in hospital ( <i>Output</i>	ent)	following settings?
	Number in private office Number in hospital ( <i>Inputio</i> Number in hospital ( <i>Output</i> Number in clinic ( <i>Not asso</i> Number in nursing home ( <i>H</i>	ent)	
	Number in private office Number in hospital (Inpatro Number in hospital (Outpat Number in clinic (Not asso Number in nursing home (H Number in patient's home	ent) vent) crated with a hospital)	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)
	Number in private office Number in hospital (Inpate Number in hospital (Outpate Number in clinic (Not asso Number in nursing home (II Number in patient's home Number in other setting (Sp	ent) vent) crent) crated with a hospital) ome for the aged, domicilia	try, etc.)

### 1974 Survey Questionnaire

CONFIDENTIALITY: Your name and street address will be kept confidential by the National Center for Health Statistics (NCHS) and will not be released to anyone, for any reason whatsoever. The balance of the information supplied on the questionnaire will be released to the Bureau of Health Resources Development for the purposes described in the attached letter. Any additional publication or release of information from this questionaire by the NCHS, will be in the form of aggregated statistical data only. Return of this questionnaire acknowledges your agreement to the release of these data by the NCHS in the manner outlined above.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

O.M.B. NO: 68S-731213

APPROVAL EXPIRES: DECEMBER 31, 1974

REV. 1-74	NATIONAL 5600 Fis IN	CENTER FOR HEALTH STATISTICS hers Lane Rockville, Maryland 20852 I COLLABORATION WITH	_	ALINOVAL	LA MES. DECEMBER 31, 1374
1974 511		TEALTH RESOURCES DEVELOPMEN ONS TRAINED IN P		MEDICINE	
<u> </u>	WET OF TERO		Date you	<del></del>	name and/or mailing address
			completed		
		this	questionnaire		
L			fo. Day Yr.		
	INSTRUCTIONS F	FOR QUESTIONS 1, 2, and 3 ovide the correct information	3. If the 1970 r under the "co	esponses are incorre	ect or blank,
	1970 RESPO	NSE	T ····································	CORRECT RESP	DNSE
1. Year of	f birth	2. Sex	1. Year of	birth	2. Sex FEMALE
	hich SCHOOL OF PODI	ATRY and in what YEAR	1	ich SCHOOL OF POD	IATRY and in what YEAR
School			School		
State or for	reign country		State or fore	eign-country	· · · · · · · · · · · · · · · · · · ·
Year gradu	ated	<u> </u>	Year gradua	ted	
	Race (Check one box only			0 = 111	VAN ANATON (FOUND AND IN
1   WHITE	SE/JAPANESE	2 ☐ NEGRO C 5 ☐ FILIPINO	/HAWAHAN/KORE	_	HAN (AMER.) 'ESKIMO/ALEUT HER RACE (Specify:
5. Is your or	igin or descent (Chec			اسا	
	AN OR CHICANO		RICAN OR BORIC		
	RAL OR SOUTH AMERIC			е∏ мо	, NONE OF THESE
(Podiatric residency, atric activ	activities include: patien , in podiatric training afte	t care, teaching podiatric related er receiving podiatric degree, and		tric research, program elated activities. Includo	or institution administration, e time on vacation from podi-
7. During th	e year 1973, how ma	ny WEEKS were you in each	of the following	g categories?	· · · · · · · · · · · · · · · · · · ·
A	CTIVE IN PODIATRY	ACTIVE IN PODIATRY (Includes w	reeks in which 1 o	or more hours were spe	ent in any
		of the following: patient care, search, program or institution a other podiatric related activities;	dministration, res	sidency, in podiatric tra	ining, and
WHERE	WEEKS (	ON VACATION, MOVING, OR TEM		IVE FOR OTHER REAS	ON(S)
NONE, N	IOT ACTIVE IN POD				
WRITE	WEEKS F	RETIRED FROM PODIATRY AND/	OR ACTIVE IN A	NOTHER OCCUPATION	
0	WEEKS	ILL OR INJURED			
(ZERO)	WEEKS	UNEMPLOYED. LOOKING FOR V	ORK		
		OTHER REASON(S) (Specify: EKS = TOTAL WEEKS IN 1973	<del></del>		)
8. Are you Cl	URRENTLY ACTIVE IN	PODIATRY? (Check one box of 1 OR MORE HOURS PER WEEK		IO, CURRENTLY RETIR	ED FROM PODIATRY
P P !!	ODIATRIC RELATED COU ROGRAM OR INSTITUTION	IG: PATIENT CARE, TEACHING IRSE, PODIATRIC RESEARCH, IN ADMINISTRATION, RESIDENC OR OTHER PODIATRIC RELATED	4	ANOTHER OCCUPATI (Specify OCCUPATI O, HAVE DISABLING IL	ON:
2 🗆 Y	ES, BUT CURRENTLY: C	ON VACATION, HAVE SHORT-TER VING OR TEMPORARILY INACTIV	M	IO, UNEMPLOYED, LOO IO, OTHER REASON(S) (Specify REASON(S	FOR CURRENT INACTIVITY
	E CONTINUE		] questior	If you are not currently maire does not apply. I paid return envelope pr	y active in podiatry, remainder of Please return this questionnaire in ovided. Thank you for your parti-

9. How many HOU	PS PER WEEK	do vou IISIIALI	V spand in ass	sh of the fel	lawina nadiatri		<del></del>
3. How many moo							
	HIG. PATIENT	care regar	rdless of the setti	ng.)	ve work related to p	patient	
	HRS. TEACHING	PODIATRIC REL	ATED COURSE(S	3)			
WHERE	HRS. PODIATRIC	RESEARCH					
NONE, WRITE	HRS. PROGRAM	OR INSTITUTION	N ADMINISTRATI	ON (Associat	tions, licensing boar	ds, schools, hospitals,	etc.)
0	HRS OTHER PODIATRIC ACTIVITIES (e.g. training received after podiatric degree etc.)						
(ZERO)							
	HRS. = TOTAL PI	R WEEK USUALL	Y SPENT IN ALL	PODIATRIC A	ACTIVITIES		
10. Did you report in						VEEK IN PATIENT	CARE?
	SUALLY SPEND 1 PER WEEK IN PAT				NO. I DO NOT USUA HOURS PER WEEK I		
				3Kir 10 Q	DESTION 10a.		
					t reflect your cu ty" column that	rrent primary or applies now.	]
11. During your hour	s spent in patie	nt care, what do	you consider	to be your P	R IMARY and you	r SECONDARY ACT	IVITY?
1970 PRIMARY ACTIVITY	CUR	RENT PRIMARY ACTIVITY			ECONDARY TIVITY	CURRENT SECONDA	ARY
1 GENERAL PRA	ACTICE	1 🖂		_	CONDARY ACTIVITY		
2 SURGERY		2 🗍		2 SURGE		2 🗀	
3 FOOT ORTHOI BIOMECHAI	•	3 □			ORTHOPEDICS, OR MECHANICS	3 🗌	
4 PODOGERIATE	RICS	4 🗆		4 ☐ PODOG		4 🗆	
5 OTHER ACTIV	ΊΤΥ	5 🗌		5 GENER	AL PRACTICE	5 🗀	
				6 OTHER	ACTIVITY	6 □	
Γ	INSTRUCTION	NS FOR QUEST	TON 12.			1	
					rently provide or,		
					ervice previously columns that in		
		vices you provi		it Services	columns that in	dicate	
	nationt care w	high of the com	viana halaw aw		- de d b		
12. When providing	patient care, w	MARK ALL	vices below are	e usualiv re	ndered by you or	under your directio	
		THAT APPLY					MARK ALL THAT APPLY
1970		CURRENT			1970		CURRENT
SERVICES		SERVICES			SERVICES		SERVICES
☐ PALLIATIVE SERV					☐ FITTING S	PECIAL SHOES	
OFFICE SURGERY					ULTRASON		
PRESCRIPTION OF					DIATHERM		
☐ PHYSICAL THERA ☐ ORTHOPEDIC OR			PLEASE CONT	INLIE		AGE TREATMENT DLET LAMP TREATMEN	
☐ WHIRLPOOL TREA			· ELASE CONT		OTHER SE		ΔI []
		PLEASE GO T	O PAGE 3 ON 1	THE REVERSE	OF THIS PAGE.	]	

13a. Where is your primary pl	ace of podiatric	practice or empl	oyment located	?		1
STATE	cc	UNTY	CITY, TOWN, L	JNINCORPORATE	OR RURAL AREA	ZIP CODE
13b. For how many YEARS ha	ve you been acti	ve in podiatry in t				
<u> </u>	YEARS AC	TIVE IN STATE (Spec	rified above)			
ANSWER ALL	YEARS AC	TIVE IN COUNTY (S)	necified above)			
THREE ITEMS		TIVE IN CITY, TOWN	•	TED OR RURAL AR	FA (Specified above	n)
						· · · · · · · · · · · · · · · · · · ·
14. Which category below bes SELF-EMPLOYED:	t describes your	current PRINCIP	AL FORM OF P	ODIATRIC EMP Check o	LUYMEN!! nly one the one	usually
SOLO PRACTICE					ost hours per week	
Partnership Practice				_		
(	conjointly providing	g podiatric services of	only)	NUMBER OF	PODIATRISTS IN	
		- 15 1.1 1.1			P, INCLUDING YO	URSELF
GROUP PRACTICE (G		east one podiatrist co one person in anoth		<b>→</b>		
	_	ho can independent			PODIATRISTS IN	
tr	eat patients for no	npodiatric ailments)		GROUP, INC	LUDING YOURSELF	1
				<b>V</b>		
		n professionals in ab			WHERE	
grou	•	idently treat patients AMILY PRACTICE (M			WHERE	
		URGEON (M.D. or D	· ·		NONE,	
		ICINE (M.D. or D.O.			0	
	OTHER HEALTH	PROFESSIONALS (	Specify:	<del></del> · ·		
					(ZERO)	
STATE OR LOCAL GO PREPAID GROUP HE NON PREPAID GROU NONGOVERNMENTAI OTHER PODIATRIST	EALTH PLAN JP HEALTH PLAN				ics, nursing home	
OTHER FORM OF EMPLOYME						
Specify;						
15. Indicate the NUMBER and EXCLUDE persons who can injury, training, or vacation	n independently	STANTS whose set treat patients —	rvices you use INCLUDE assis	in your PRINC stants who are	IPAL FORM OF I temporarily abse	EMPLOYMENT - ent due to illnes
REPORT NUMBER WHERE NONE, WRITE 0		NOT SHARED by you who can independ			RED by you with 1 can independently	
MEDICAL OCCUPATION (Includes persons trained as fol- they are spending some time per	llows even if	USUALLY WORK 1 TO 34 HOURS PER WEEK	USUALLY W 35 HOURS MORE PER V	OR 1 TO VEEK PE	34 HOURS R WEEK	USUALLY WORK 35 HOURS OR MORE PER WEEK
medical functions)		(Part Time)	(Full Time	e) (Pa	irt Time)	(Full Time)
PODIATRY ASSISTAN  (Trained formally or on-th						
REGISTERED NURSE	S					
OTHER MEDICAL OCCUPA	ATIONS					
NON-MEDICAL OCCUPAT (Includes: receptionists, secreta clericals, and other assistal perform only non-medical fe	ries, typists, nts who					

		OURS (If none, write		_		gardless of the setting)	
16b.	How many DIFFERENT F see LAST WEEK, regard					f all the DIFFERENT Pacategories specified?	ATIENTS seen by you LAST
		Count each "DI number of times			ly one	ce, regardless of the	
	NUMBER OF DI	FERENT PATIENTS	WHERE % PERCENTAGE 16 YRS. OF			CENTAGE 16 YRS. OR LES	- SS
	(If none, write 0 (ZERO))		NONE,	%		CENTAGE 17 TO 64 YRS.	
			WRITE O	<u>%</u>		ENTAGE 65 YRS. OR MOR	RE
			(ZERO)	100%	=AL	L DIFFERENT PATIENTS	SEEN LAST WEEK
16d.	Of the patients seen by how many PATIENT VIS represent?	ITS do these	of the	SETTINGS	speci	fied?	S LAST WEEK were in each
			s last week.	Include ea	ch se	tal number of times eparate patient visit, n once.	
_	NUMBER OF PA	TIENT VISITS		%	PERC	ENTAGE IN PRIVATE OFF	ICE
(	If none, write 0 (ZERO))		%	PERC	ENTAGE IN HOSPITAL, IN	PATIENT	
			WHERE	%	PERC	ENTAGE IN HOSPITAL, O	UTPATIENT
			NONE,	%	PERC	ENTAGE IN CLINIC (Non	hospital clinic)
		, I	WRITE	%_			ME (Home for the aged, extended st home, convalescent home, etc.)
			O (ZERO)	%		ENTAGE IN RESIDENT FA	ACILITY OR SCHOOL FOR THE
		l		%	PERC	CENTAGE IN PATIENT'S H	НОМЕ
				%	PERC	ENTAGE IN OTHER SETTI	NG(S)
				100%	= ALI	L PATIENT VISITS LAST V	VEEK
17.	Are you currently in a:				YES	NO	
	ANSWER ALL	<ol> <li>HOSPITAL RESIDEN</li> <li>CLINIC RESIDEN</li> </ol>				2 □ 2 □	
	THREE ITEMS	3) PRECEPTORSHIP				2	
18.	Do you currently have:				YES	NO	
	ANSWER	1) HOSPITAL PRIVI	LEGES?		ι 🔲	2 🗆	
	BOTH ITEMS	2) CLINIC PRIVILEG	ES?	;	r 🗀	2 🗌	
Comn	nents and Suggestions:		,				

HRA-T2 (PAGE 4) REV. 1-74

Thank you for your participation. Please return this completed questionnaire using the prepaid return envelope provided.

#### VITAL AND HEALTH STATISTICS Series

- Scrics 1. Programs and Collection Procedures.—Reports which describe the general programs of the National Center for Health Statistics and its offices and divisions and data collection methods used and include definitions and other material necessary for understanding the data.
- Series 2. Data Evaluation and Methods Research.—Studies of new statistical methodology including experimental tests of new survey methods, studies of vital statistics collection methods, new analytical techniques, objective evaluations of reliability of collected data, and contributions to statistical theory.
- Series 3. Analytical Studies.—Reports presenting analytical or interpretive studies based on vital and health statistics, carrying the analysis further than the expository types of reports in the other series.
- Scries 4. Documents and Committee Reports.—Final reports of major committees concerned with vital and health statistics and documents such as recommended model vital registration laws and revised birth and death certificates.
- Series 10. Data From the Health Interview Survey.—Statistics on illness, accidental injuries, disability, use of hospital, medical, dental, and other services, and other health-related topics, all based on data collected in a continuing national household interview survey.
- Series 11. Data From the Health Examination Survey and the Health and Nutrition Examination Survey.—Data from direct examination, testing, and measurement of national samples of the civilian noninstitutionalized population provide the basis for two types of reports: (1) estimates of the medically defined prevalence of specific diseases in the United States and the distributions of the population with respect to physical, physiological, and psychological characteristics and (2) analysis of relationships among the various measurements without reference to an explicit finite universe of persons.
- Series 12. Data From the Institutionalized Population Surveys.—Discontinued effective 1975. Future reports from these surveys will be in Series 13.
- Scries 13. Data on Health Resources Utilization.—Statistics on the utilization of health manpower and facilities providing long-term care, ambulatory care, hospital care, and family planning services.
- Scries 14. Data on Health Resources: Manpower and Facilities.—Statistics on the numbers, geographic distribution, and characteristics of health resources including physicians, dentists, nurses, other health occupations, hospitals, nursing homes, and outpatient facilities.
- Series 20. Data on Mortality.—Various statistics on mortality other than as included in regular annual or monthly reports. Special analyses by cause of death, age, and other demographic variables; geographic and time series analyses; and statistics on characteristics of deaths not available from the vital records based on sample surveys of those records.
- Series 21. Data on Natality, Marriage, and Divorce.—Various statistics on natality, marriage, and divorce other than as included in regular annual or monthly reports. Special analyses by demographic variables; geographic and time series analyses; studies of fertility; and statistics on characteristics of births not available from the vital records based on sample surveys of those records.
- Scries 22. Data From the National Mortality and Natality Surveys.—Discontinued effective 1975. Future reports from these sample surveys based on vital records will be included in Series 20 and 21, respectively.
- Scries 23. Data From the National Survey of Family Growth.—Statistics on fertility, family formation and dissolution, family planning, and related maternal and infant health topics derived from a biennial survey of a nationwide probability sample of ever-married women 15-44 years of age.

For a list of titles of reports published in these series, write to:

Scientific and Technical Information Branch National Center for Health Statistics Public Health Service Hyattsville, Md. 20782

## DHEW Publication No. (PHS) 79-1816 Series 14 - No. 21

## **NCHS**

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service Office of the Assistant Secretary for Health National Center for Health Statistics 3700 East West Highway Hyattsville, Maryland 20782

OFFICIAL BUSINESS PENALTY FOR PRIVATE USE, \$300

For publications in the Vital and Health Statistics Series call 301-436-NCHS. POSTAGE AND FEES PAID U.S. DEPARTMENT OF HEW HEW 396

> THIRD CLASS BLK. RATE



