



NYCPM
New York College of Podiatric Medicine

Get to Know NYCPM's Faculty:
Robert A. Eckles, DPM, MPH
University of Pittsburgh, 1977 (MPH)
California College of Podiatric Medicine, 1983 (DPM)
Dean, Clinical and Graduate Medical Education
Associate Professor, Department of Orthopedic Sciences



While many NYCPM faculty studied at the College and may have been College residents before teaching here, Robert A. Eckles, DPM, MPH, followed a long, winding, international path to the school. After he earned his MPH degree at the University of Pittsburgh in 1977, Robert A. Eckles, MPH, became a patient at the podiatry hospital of Pittsburgh. He was struck by how well he was cared for there, and how passionate and open the residents were about what they were doing. Two years later, Dr. Eckles began to study podiatry himself at the California College of Podiatric medicine and graduated in 1983.

He started working in Northern California, and after 5 years in practice, answered an ad for a podiatrist to teach podiatric surgery in New Zealand. He was a full-time lecturer there for three years and found great satisfaction working with students. He remained in New Zealand in private practice until 1997.

Upon his return to the U.S., he found work in Poughkeepsie, NY and with an eye on resuming teaching, sent his CV to NYCPM. Justin Wernick, DPM, then Chair of Orthopedics/Pediatrics at the College, reached out to him in late 2002 and Dr. Eckles joined the faculty here in March 2003. Dr. Eckles says he is privileged to serve the podiatric community through an appointment to the New York State Podiatrists Board; he is also a Member of the Board of Directors for the National Board of Podiatric Medical Examiners.

As Dean for Clinical Education since 2006, Dr. Eckles oversees third and fourth year didactic, as well as clinical rotations; all junior and senior schedules and their exams are under his (relative) control, working with Department Chairs Drs. DeLauro, Jules and Logan. His highest priority is meeting critical institutional goals – high board pass rates and graduate placement rates – and he is proud of the fact that at this time NYCPM has the highest average graduate placement rate of any of the podiatry schools, and that our Part II APMLE board pass rate is one of the highest as well.

But at the same time Dr. Eckles wants NYCPM students to be more than their grades or their placement outcomes. He hopes they transition to residency training with positive



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non-cognitive behaviors, e.g., that they communicate well with their patients and integrate successfully into the complex financial and political cultures of teaching hospitals. He feels that NYCPM has created an excellent learning environment through its exceptional faculty who provide the modeling and direction that helps students apply what they “know” to real-time solutions for clinic and hospital patients.

As Dean for Graduate Medical Education he is director of the College PMSR/RRA program, and is responsible for College-run continuing education programs for licensed DPMs. The greatest challenge in recent years, he notes, has been the development of a graduate placement crisis. The evolution of residency training models and the financial downturn of 2008 led to a serious reduction in residency positions several years ago. Action by CPME, AACPM, the Colleges and other stakeholders has somewhat eased this situation so that at this time “we are very close to equilibrium, with an equal number of seniors and number of positions,” he said. The relative shortage of positions has created a bottleneck within the profession as a whole as well. Growth of the profession can’t occur without available graduate training positions, and demographically, there is an entire generation of DPMs in communities across the country who can’t be replaced numerically with the current volume of graduates.

Dr. Eckles remains optimistic, despite all of this, noting that incoming students are much more academically accomplished than students of a decade ago, and observes that their personal objectives are often higher as well. The adoption of the 3-year graduate training model and the fact that 90+% of programs are now classified as reconstructive rearfoot and ankle (RRA) is a “profoundly important trend”. This, Eckles says, should translate to even more integration of podiatrists into hospital and multi-specialty practices and to an acceleration of public demand for DPM services. It is “a great time to be a podiatrist,” and Dr. Eckles is honored to be part of this institution and the education of student podiatrists.