

Reinvention

New facility aims to guide patients through the amputation journey

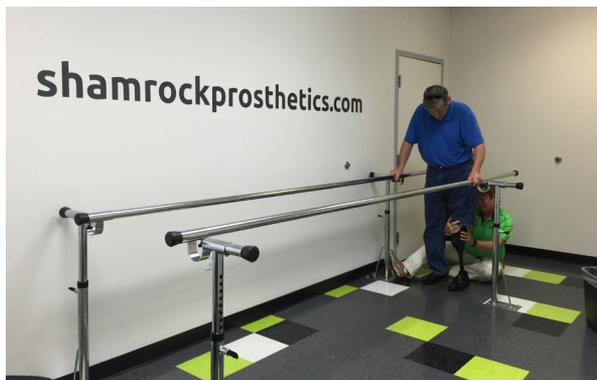
STEVE EHRETSMAN BECAME a below-knee amputee in April 2002 after undergoing 13 surgeries to address a traumatic injury. That experience shifted his career focus from the corporate world to the health-care sector, and he eventually joined a prosthetic company in Atlanta as vice president of sales and marketing.

Ehretsman also had an idea about how the prosthetics process should operate based on his own experience as a patient. “The O&P industry is very reactive,” he explains. “The normal course of action is that the surgeon amputates a limb, and the patient sees a prosthetist when it has healed. I wanted to make the process proactive, where I would see the patient before surgery and again every week after the operation as he or she heals.”

He believes it is important to connect with the amputee early on, both physically and on mental and emotional levels.

Ehretsman decided to open a prosthetic facility based on that idea, and he immediately called a former colleague, Tom Karr, to join him in the venture. Karr had spent more than 30 years in hospital management, 25 of them as chief operating officer of a major Atlanta health-care system, and seven years as manager of a prosthetics company. Karr had tried retirement twice and was happy to give it up again to help start a new business, once he heard Ehretsman’s vision.

In April, Ehretsman, chief executive officer, and Karr, chief operating officer, opened Shamrock Prosthetics in Athens, Georgia.



FACILITY:
Shamrock
Prosthetics

LOCATION:
Athens, Georgia

OWNER:
Steve Ehretsman

HISTORY:
5 months



The company takes its name from the three leaves of a shamrock, says Ehretsman, which represent the three journeys of the amputee: hope, inspiration, and reinvention.

Shamrock’s involvement with a patient begins when Ehretsman receives a text or phone call from a surgeon. Ehretsman meets with the patient during the pre-op appointment or at another time. “This is the hope phase,” he says. “I talk about the journey. I want to know where you were, where you are, where you want to go. Many patients are apprehensive; some don’t even want to use the word ‘amputation.’ My job is to give them hope that life will be okay, if not even better, after this, and I can use my own experience to show them.”

Phase 2, inspiration, takes place as Ehretsman visits the new amputee once a week. The meetings generate a bond, he says, and as patients heal, they are able to take inspiration from Ehretsman’s own journey as an amputee. In addition, he shares photos of the patient’s residual limb with the surgeon, maintaining continuity of care and communication, which are “sometimes lacking in the health-care space,” he says.

Once the patient has healed sufficiently—usually at the four- to six-week point—he or she wears a shrinker sock for about a week, and then Shamrock’s Sharon Kelly, a certified prosthetist for 31 years, begins the clinical aspect of casting and fitting an appropriate device. That is the reinvention stage, says Ehretsman.

Throughout the process, Ehretsman and Kelly make a point of listening as much as they talk. “We make sure it’s a two-way dialog,” he says. “As a patient, I’ve been to too many providers where the talk went only one way.”

In addition to Karr and Ehretsman, Shamrock has four employees, including Kelly, a fabrication manager, and a front office administrator. Jarryd Wallace, who is a current Paralympian and unilateral amputee, is learning to work under Ehretsman in the first two phases of care.

The facility occupies 3,400 square feet, with all fabrication completed on the premises. Shamrock’s patient volume has exceeded initial forecasts since it opened its doors in April, says Ehretsman. Marketing efforts so far have focused on word of mouth—a website is yet to come—but Ehretsman is not worrying about volume.

“We are building valued relationships with surgeons. When you blend passion and authentic purpose in creating a patient-care facility, that becomes evident to referrers and amputees,” he says. “We build a lifetime bond with our patients. We are invested in their journey from the beginning—and for the rest of their lives.” **CP**

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