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New Technology Pathway process

Digital-health technology

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See new tech and trusted resources in Dallas

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Gender bias affects all of us

I have been invited on a couple of recent occasions to speak on “women in otolaryngology.” The talks raised some interesting conversations, and it occurred to me that I have not touched on this issue in prior columns. I have nearly reached the end of my term, so here goes.

I was very happy to be elected as your president, particularly since there had not been another woman president of the Academy, since the first one, M. Jennifer Derebery, MD. And then, the year after my election, you chose another woman, Sujana S. Chandrasekhar, MD, to be my successor. So, it looks like we have no more gender issues, in our field, right?

Actually, not. I don’t want to sound whiny or ungrateful, but the playing field is not yet level. Jonas T. Johnson, MD, published an excellent review in 2014, reporting that male physicians earn $60,000 more per year and that the proportional representation of women in upper ranks has remained unchanged for more than 35 years. Otolaryngology is not alone among specialties with regard to gender bias, although we rank near the bottom in terms of the percentage of department chairs held by women. A recent study found that 23 percent of the men, but only 5 percent of women appointed as assistant professors reached the rank of full professor within a decade.

Women usually assume more responsibility in the home and this, undoubtedly, contributes to the lower rate of publication by women in earlier years of their careers and lower pay. But even after controlling for hours worked, women earn less.

I personally don’t believe that the problem is a “glass ceiling,” nor do I believe in any conspiracy of males to repress females in our specialty. In my own career, all of my mentors have been men, and I have been very fortunate to have their guidance and support. But it is true that the pathway is still steeper for women than men. According to Charlotte Whitton, the first female mayor of a major Canadian city, “Whatever women must do they must do twice as well as men to be thought half as good,” and there is good evidence that this is true.

Let’s consider the five women who currently chair otolaryngology programs in the United States. I will throw in myself, as a recently retired chair, to increase the sample size to six women. A 2013 survey of otolaryngology chairs in the U.S. found that eight of 95 had active NIH funding. This is interesting because three of six women have current NIH funding and two were funded in the very recent past.

A major issue is unconscious bias. Randomized trials have documented that credentials with a masculine name are consistently rated significantly higher than those with a feminine name. This is true whether the reviewer is a male or a female. I challenge you to go online to www.implicit.harvard.edu to test your own gender bias. I have taken the test myself, and I learned that I have “a strong association of Male with Career and Female with Family compared to Female with Career and Male with Family.”

The issue of unconscious gender bias is not just a “women’s issue.” Like ethnic and racial bias, it affects all of us. Beyond the issue of fairness to individuals, our society loses when talents and enthusiasm of people do not come to fruition. So what can be done? In his book Blink Malcolm Gladwell cites the experience of a black man who was frustrated that his “bias test” always indicated he was pro-white. Then, one day, his result on the test flipped. Why? He had watched Olympic track and field events the day before! Unconscious bias is our response to what society and culture feed us.

We have definitely come a long way from the ’70s when women were first admitted to medical school in significant numbers, and I am confident that progress will continue, but it would be nice to accelerate things. It has been said that “nothing succeeds like success.” The most effective antidote to unconscious bias is exposure to positive images. In order to achieve diversity, we must celebrate diversity. And any selection process should always involve a conscious effort to include female and minority as well as all qualified candidates in consideration.

Gayle E. Woodson, MD
AAO-HNS/F President
and not a summer lost... even with ventilation tubes

Please consider DOC'S PROPLUGS for all your child's swimming and bathing needs

blue, non-vented

pink, non-vented
Matching capacity to demand

recently attended the digitalNow 2015 conference and had the good fortune to hear one of the most dynamic speakers and innovative thinkers that I have come across in many years. Rachel Botsman, co-author of What’s Mine Is Yours: The Rise of Collaborative Consumption, gave a revealing presentation on how “collaborative consumption” is changing the way business is being done worldwide through a collaborative economy that seeks to unlock value in different ways from existing assets. She described cultural changes such as a trend toward access over ownership. Both individuals and corporations are evolving from asset-heavy entities to asset-light situations. The overall trust of organizations is declining, however, trust of members within organizations is increasing. Consumers as well as providers of service are seeking two-way engagement in their interactions. The overall economy, including healthcare, has significant idle capacity. Innovative ways to match this capacity to demand have fostered a number of successful business ventures such as Uber, Airbnb, and Zipcar.

Ms. Botsman says that traditional sources and markets can be disrupted by five major things. First, complex experiences can create opportunity. Most consumers favor simplicity in their dealings and want transactions to be as simple as possible. Second, waste within a system gives impetus to modify that system. Third, broken trust between the participants involved in any interaction can stimulate change. Fourth, redundant intermediaries lead to the desire for direct exchanges. Lastly, limited access is a primary driver for alteration. Any one of these drivers can lead to significant change in the way business is done. When looking at the healthcare system, one can clearly identify that each of these “disruptors” comes into play on a daily basis and thus the healthcare industry and even medical associations may see significant changes in the way business is transacted.

The term “value” is dominating the discussions for the evolution of healthcare. This value is defined in a quality and cost paradigm. However, based on what is happening in the consumer world, we should also be looking at simplifying the process one must go through to get care, increase access to the care that patients want, and facilitate more direct opportunities to receive care. As has been shown in multiple industries, “peer trust” is essential to optimizing these new relationships. The value and necessity of “peer trust” is evident in the two-way rating system used by many new companies as well as the patient satisfaction rating systems used for healthcare-related activities.

In combination, these trends have a propensity to bypass traditional organizations and create non-traditional communities based on needs and availability of services. Organizations that are successful will find different and novel ways to “be in customers lives.” When disruption takes place, there are three possible, typical reactions organizations can take. They can act like an ostrich and pretend nothing is happening, they can fight the change taking place, or they can be pioneers in changing their own destiny. The pioneers who recognize the change and embrace the opportunity to change with it can be very successful. They will figure out how new value will be created for their customers, how they can scale that value, and how best their customers can consume their product.

In the healthcare industry, this revolution has not taken off yet and opportunity abounds to alter the way we deliver care, evaluate and improve care, educate both providers and the public, communicate with patients and each other, and accomplish all of these in a very transparent fashion. We have already seen and will continue to see major changes in the education field with more “on-demand” and web-based content produced and consumed. As entrepreneurs focus on the healthcare industry we will likely see hybrid solutions with multiple sources of money driving them. New ideas for Alternative Payment Models will likely surface from smaller scale local experimental pilot models. Given the role of peer trust in a collaborative consumption system, it will be essential that healthcare providers maintain transparency and quality to gain consumer buy-in as the system evolves. This reputation capital will be what drives successful integrated systems and why it is essential that the house of otolaryngology works together through these changes.
Journal earns highest ever impact factor

Otolaryngology–Head and Neck Surgery, the official journal of the AAO-HNSF, received an impact factor of 2.020 in Thomson Reuters 2014 Journal Citation Reports®. This is the highest the journal has ever received and a 17 percent increase from last year.

The 2014 impact factor measures the frequency with which articles the journal published in 2012 and 2013 were cited in 2014.

“A journal’s impact factor in many ways is a proxy for its degree of importance in its field,” said Editor-in-Chief John H. Krouse, MD, PhD, MBA. “It examines how frequently a jour-
nal’s papers are cited by other authors in their published work and, therefore, represents the usefulness of that journal’s articles to other clinicians and scientists.”

A higher impact factor is a positive sign that the journal is achieving its stated mission of publishing contemporary, ethical, clinically relevant information to help otolaryngologists, scientists, clinicians, and related specialists improve patient care and public health. Moreover, an increasing impact factor may further support this mission by attracting more high-quality submissions in the future.

“Many academic physicians look at the impact factor when deciding where to submit their manuscripts,” Dr. Krouse said. “This is true both in the United States and abroad, and many international universities place even more weight on impact factors. An impact factor greater than 2.0 should encourage a higher volume of submissions, as well as submissions of higher quality and value to the journal, especially from the international community.”

**Bigger and better: New AcademyU® coming soon**

The Foundation is bringing you a bigger and better learning experience with the launch of the new AcademyU® learning platform. The new AcademyU® will be:

- **learner-focused**, with features designed to optimize your experience to search, discover, and share knowledge.
- **personalized**, with the ability to recommend courses to users based on their professional interests and background.
- **social**, with a variety of discussion communities focused on education and professional development.
- **user-friendly**, with easy access to increased content, search, and continuing education transcripts.
- **searchable**, with an integrated search function from all resources on the AAO-HNS/F website.
- **flexible**, with a variety of course formats to match your learning style.

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Two-step to the Advocacy Booths at this year’s Annual Meeting

With the AAO-HNSF 2015 Annual Meeting & OTO EXPO® approaching, now is the time to learn more about advocacy-related programming available at the upcoming meeting in Dallas. Similar to last year's meeting, the presence of two legislative advocacy booths will provide attendees with greater access to information regarding the Academy’s legislative, political, and grassroots programs. The legislative advocacy booths will be easily accessible in the Kay Bailey Hutchison Convention Center near Lobby D (level 2) and outside the Omni Dallas Hotel’s Dallas Ballroom.

Stop by one (or both) of the booths to learn more about our various program offerings and to:

- Receive updates on bills impacting your practice and your patients.
- Join the ENT Advocacy Network for timely updates on political and legislative issues impacting the specialty and a free subscription to a biweekly e-Newsletter, The ENT Advocate.
- Volunteer to be a “state tracker” for the specialty.
- Learn how to schedule local meetings with your legislators via the Academy’s “I-GO” program.
- Obtain information on becoming a 2015 ENT PAC Investor* and help celebrate the PAC’s 20th anniversary!

In recognition of our 2015 PAC Investors and advocacy leaders, the ENT PAC Board of Advisors and staff have also scheduled various events during the meeting. Please mark your calendars to join these events.

ENT PAC’s 20th Anniversary Celebration
Help celebrate 20 years of political advocacy via ENT PAC. Visit the Legislative Advocacy booths for cake and goodies, and to learn more about our 20th anniversary campaign.

For more information regarding the above-mentioned advocacy-related events, contact govtaffairs@entnet.org. We look forward to seeing you down in Texas.

*Contributions to ENT PAC are not deductible as charitable contributions for federal income tax purposes. Contributions are voluntary, and all members of the American Academy of Otolaryngology—Head and Neck Surgery have the right to refuse to contribute without reprisal. Federal law prohibits ENT PAC from accepting contributions from foreign nationals. By law, if your contributions are made using a personal check or credit card, ENT PAC may use your contribution only to support candidates in federal elections. All corporate contributions to ENT PAC will be used for educational and administrative expenses of ENT PAC, and other activities permissible under federal law. Federal law requires ENT PAC to use its best efforts to solicit the name, mailing address, occupation, and the name of the employer of individuals whose contributions exceed $200 in a calendar year.
Two Physician Payment Policy Workgroup (3P)-supported Miniseminars and a Board of Governors Instruction Course have been included in the robust Annual Meeting schedule to provide exciting learning opportunities: Business of Medicine for Residents and Fellows: Planning for the Future; New Payment Models: Effects on Otolaryngology Reimbursement; and Board of Governors’ Hot Topic 2015: Practicing Otolaryngology in 2025. Please mark your calendars so you don’t miss these sessions.

Business of Medicine for Residents and Fellows: Planning for the Future
Monday, September 28, 2015
11:00 am – 12:00 pm
Room: D161
Once the residency and fellowship training period ends, the focus shifts to the various practical questions surrounding providing quality care to patients and how to navigate everyday life as a practicing otolaryngologist.

New Payment Models: Effects on Otolaryngology Reimbursement
Monday, September 28, 2015
1:00 – 2:00 pm
Ballroom C Four, Kay Bailey Hutchison Convention Center
The Academy, through the Ad Hoc Payment Model Workgroup, continuously analyzes the trends and developments in current payment reform efforts. We work to keep well-informed of the payment reform trends to let you know how current alternative payment models changes will affect our profession and our patients in the near future.

Join a panel of Academy payment reform experts as they share their personal experiences with alternative payment models, focusing on the potential benefits and risks for otolaryngologists. Additionally, Ad Hoc Payment Model workgroup leaders will discuss recent Academy efforts to work with private payers and CMS to develop potential models that would allow for otolaryngologists to participate in the new value-based payment system and receive credit for participation in alternative payment models (APMs), such as the 5 percent incentive CMS will give to providers participating in APMs in 2019-2024 under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

Board of Governors’ Hot Topic 2015: Practicing Otolaryngology in 2025
Tuesday, September 29, 2015
11:00 am – 12:30 pm
Room: D167
With the evolution of hospital employment, mergers, and subspecialization, expert panelists, consisting of Academy leaders in private practice and academics, will discuss the challenges faced by today’s otolaryngologists and what the practice of otolaryngology in 2025 may look like. Presentations will be made on hospital mergers and acquisitions, hospital employment versus independent practice, academic employment models, and subspecialization trends.

Can’t wait for the Annual Meeting to learn more about APMs in otolaryngology or share your own experience? Come read and contribute anytime to the discussion on ENTConnect at www.entconnect.org.

Educational sessions at the Annual Meeting will provide attendees with information about practice management and alternative payment models.
AAO-HNS, AIUM create accreditation pathway

For the past three years the AAO-HNS has been working closely with the American Institute for Ultrasound in Medicine (AIUM) to develop a mutual accreditation pathway in head and neck ultrasound. We are proud to announce that this pathway has been completed and is now available. This pathway illustrates the value and importance of continuing medical education.

Individuals who have completed and passed the American College of Surgeons’ (ACS) postgraduate course in head and neck ultrasound can now use that as one of the pathways to meet the “training guidelines for physicians who evaluate and interpret ultrasound examinations of the head and neck,” a necessary requirement for practices or institutions to begin the accreditation process through the AIUM. Ten case study submissions are required from each interpreting physician listed on the accreditation application.

A Review Board of otolaryngologists experienced in performing ultrasound and teaching at various ACS courses will assess the images as part of the application review process. Thyroid/parathyroid accreditation can be accomplished as part of the global head and neck project or as a focused interest in this clinical area alone. For more information on this opportunity or to begin your accreditation, visit www.aium.org/accreditation/accreditation.aspx.

The AIUM, the association for medical ultrasound, is a multidisciplinary medical association of more than 10,000 physicians, sonographers, scientists, students, and other healthcare providers. The AIUM is dedicated to advancing the safe and effective use of ultrasound in medicine through professional and public education, research, development of guidelines, and accreditation. For more information, visit www.aium.org.
A year after completing his residency training at the Tufts University/Boston University combined otolaryngology program, Dennis H. Snyder, MD, founded Medical Missions for Children (MMFC), a Boston-based charity that focuses on the surgical care of children with cleft lip, cleft palate, burn injuries, and microtia. Since 1991, MMFC has sponsored more than 350 missions worldwide. Dr. Snyder, MMFC’s chairman since its inception, has been a surgical volunteer/team leader in more than 130 missions in 15 different countries.

Dr. Snyder also has volunteered with a number of other medical charitable organizations, including Pro Christo, Project Perfect World, Healing the Children, and The Smile Train.

Dr. Snyder’s personal involvement inspired one colleague to note, “His fervor is contagious as evidenced by the numerous colleagues that have supported his mission and goals.”

Each year this honor is given to a member who is widely recognized for a consistent, stable character distinguished by honesty, zeal for truth, integrity, love and devotion to humanity and a self-giving spirit.

Dennis H. Snyder, MD

Nikhila P. Raol, MD, MPH received her bachelor of arts degree at Rice University in Houston, TX. She went on to get her MD at the University of Texas Southwest- ern Medical Center at Dallas and subsequently completed her residency in the Bobby R. Alford Department of Otolaryngology at Baylor College of Medicine. She is currently in her third year of her pediatric otolaryngology fellowship at the Massachusetts Eye and Ear Infirmary at Harvard Medical School. She is also a Cabot fellow at the Center for Surgery and Public Health at the Brigham and Women’s Hospital, where she is studying and conducting health services research. During her fellowship, she completed her Master of Public Health at the Harvard School of Public Health.

Dr. Raol has published more than 20 peer-reviewed articles and book chapters, has served as a book editor, has participated in humanitarian outreach, and has won awards for leadership and teaching. She has been active in the Academy for the past five years, beginning as a third-year resident, serving in a number of leadership roles in the Section for Residents and Fellows and for her unwavering support and promotion of the AAO-HNS mission and goals.

The Holt Leadership Award is given to a resident or fellow who best exemplifies the attributes of a young leader—honesty, integrity, fairness, advocacy, and enthusiasm.

2015 Holt Leadership Award

Charles E. Moore, MD

Charles E. Moore, MD, received a bachelor’s of science degree from Union College and his medical degree from Harvard Medical School. He subsequently completed residency training in otolaryngology-head and neck surgery and fellowship training in craniomaxillofacial-cranial base, facial plastic and reconstructive surgery at the University of Michigan. Dr. Moore is currently the Chief of Service in the Department of Otolaryngology–Head and Neck Surgery at Grady Health System and a faculty member at Emory University. His research focus has been in the investigation of factors involved in healthcare disparity with a particular focus on head and neck cancer incidence in medically underserved communities. He is also actively involved in research of craniomaxillofacial trauma and anterior cranial base tumor pathology.

Dr. Moore is the president and founder of Health Education, Assessment and Leadership (HEAL), Inc. In this position, he has created a free and affordable health center for underserved areas. Dr. Moore is also the recipient of the Zenith Award for Humanism in Medicine. He is also the recipient of the Zenith Award for Community Activism from the City of Atlanta for his work in impoverished communities.
Susan R. Cordes, MD
Chair, BOG Legislative Affairs Committee

In the 18th century, the head mirror was new technology, allowing the physician to visualize areas previously inaccessible. Now, when I take out my head mirror, children snicker and adults comment, “I didn’t know doctors used those anymore.” The head mirror isn’t the only otolaryngology staple that has been replaced by more sophisticated technology. Endoscopes and related instruments, in-office imaging systems, electronic health records—the list goes on and on. It can be daunting enough to try to keep up with the latest in medical knowledge, let alone with technological advances. Fortunately, the Annual Meeting combines these tasks by offering the OTO EXPOSM in addition to the myriad educational activities.

OTO EXPOSM is like Disneyland for otolaryngologists. Just walking into the EXPO inspires a sort of wonder and awe. OTO EXPOSM presents the opportunity to evaluate with colleagues in order to make the best decisions. Between educational sessions, one often hears: “Do you use this?” “Have you tried that?” “How do you do this?” Newer is not necessarily better, though. Some technologies will not prove to be useful assets to our practices or our patients. As physicians, we have the responsibility of evaluating new technologies and determining whether they are safe, cost effective, and appropriate alternatives that will improve patient care. Our patients trust us to educate ourselves and make the best decisions on their behalf, and that includes the adoption of new technology. In addition to having products on display in the OTO EXPOSM, the Annual Meeting is the opportunity to hear from leaders in the specialty and to discuss tools and techniques with colleagues in order to make the best decisions. Between educational sessions, one often hears: “Do you use this?” “Have you tried that?” “How do you do this?” These exchanges are invaluable and part of what makes the Annual Meeting such an exciting and unique event.

Bringing otologic, audiologic services to Nicaragua

Theodore McRackan, MD, Humanitarian Travel Grant Awardee
Dr. McRackan and Ilka Naumann, MD, point to a pre-operative patient’s CT with the residents at Lenin Fonseca, the public teaching hospital in Managua, as a part of a mission trip with Mayflower Medical Outreach.

'Do you use this?' 'Have you tried that?' 'How do you do this?'

Bringing otologic, audiologic services to Nicaragua

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'Do you use this?' 'Have you tried that?' 'How do you do this?'

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Medicine is a science, an art, and a profession. As professionals, we have committed to putting the interests of our patients at the forefront and keeping ourselves educated in the latest advances in our field. Some technologies come and go, never to be heard again; others change our specialty and our lives forever. In this world of rapidly evolving technology, there will always be a need for a balance of the old and new, and there will always be a role for the physician using good, solid judgment to determine what is in the best interest of his or her patients. Though I have replaced my head mirror with a powerful electric headlight, at least for now I will keep my head mirror right here in my pocket, if for no other reason than to remind me of the art of being an otolaryngologist.
ach year, the AAO-HNS Board of Governors (BOG) highlights outstanding individualized efforts of its state societies and Members. Below are the results of the 2015 BOG Awards. Congratulations!

**BOG Model Society Award**
The Model Society Award recognizes outstanding local/state/regional societies that exhibit effective leadership. The 2015 Model Society Award is based on activities from February 1, 2014, through January 31, 2015.

The Pennsylvania Academy of Otolarygology-Head and Neck Surgery (PAO-HNS) is the recipient of the 2015 BOG Model Society Award. The PAO-HNS is well represented on the BOG by Karen A. Rizzo, MD, Governor, Jeffrey P. Simons, MD, Legislative Representative, and Jason G. Newman, MD, BOG Socioeconomic & Grassroots Representative.

The PAO-HNS had a major legislative victory in 2014 after a 12-year effort to battle legislation that would inappropriately expand the scope of practice of audiologists and speech-language pathologists. All otolaryngologists in Pennsylvania benefit from PAO-HNS representation on the Pennsylvania Medical Society’s Specialty Leadership Cabinet and the region’s Medicare Contractor Advisory Council. This representation gives the specialty a voice on issues impacting all of medicine and in the development of local carrier determinations for Medicare reimbursement.

**BOG Model Society Honorable Mention Award**
The Connecticut Ear, Nose & Throat Society (CENTS) is recognized with the 2015 BOG Model Society Honorable Mention Award. David S. Boisoneau, MD, Governor, Raymond E. Winicki, MD, Legislative Representative, and Ken Yanagisawa, MD, Socioeconomic & Grassroots Representative, are the CENTS representatives.

In 2014, CENTS participated in several public awareness activities, including, but not limited to, a Doctor’s Day at the Capitol, the organization of seven free statewide head and neck cancer screenings during Oral, Head, and Neck Cancer Awareness Week, and a World Voice Day proclamation/resolution in their General Assembly.

**BOG Practitioner Excellence Award**
The Practitioner Excellence Award recognizes the prototypical clinical otolaryngologist one wishes to emulate. The Practitioner Excellence Award is open to AAO-HNS Members in good standing and requires that within the past 10 years, the physician nominated has practiced medicine in an exemplary manner and is sought out by other physicians because of his or her personal and effective care. In addition to clinical skills, the nominee must possess one or more of the following attributes: civic leadership; charitable activity; leadership involvement with local, state, regional, or national medical organizations; community education; or engagement in local civic and/or community activities.

The 2015 BOG Practitioner Excellence Award is presented to Robert J. Stachler, MD. Dr. Stachler is in academic practice at Henry Ford, helping to shape our future colleagues. He is strongly committed to the success of our specialty and has been an active member of the AAO-HNS and Michigan Otolaryngology Society for many years. As noted in his nomination application, Dr. Stachler “is the kind of workhorse individual that jumps into projects with his sleeves rolled up and ready to work. He does not shy away from difficult projects, rather he seeks them out. His hard work and reliability are what merits the appropriate recognition of Practitioner Excellence Award.”

Please join the BOG to honor the award recipients during the BOG General Assembly meeting, 5:00-7:00 pm, Monday, September 28, in Dallas.
M. Academy and Foundation
14
BOG: ant work.
passion to carry out this import-
affecting medicine, integrity, and
understanding of the issues
of commitment to excellence,
and what is your experience?
What are your qualifications
Parikh, MD
Sanjay R.

I feel passionately that the BOG
must help otolaryngologists
combat the loss of individual au-
tonomy coupled with decreasing
reimbursement and increasing
expenses/mandates. As BOG
Chair, I will work with Acade-
my leadership to aggressively
respond to these challenges.
My focus will be on action-orien-
ted advocacy programs includ-
ing the ENT Advocacy Network,
I-GO program, and ENT-PAC.
Similarly, communication with
our societies and education re-
garding the changing landscape of
healthcare will be priorities.
I will champion grassroots input
as we roll out the ENT data registry
in order to address national quality
reporting system requirements and
establish data to benchmark our
personal quality ratings.
Moreover, society engage-
ment is imperative and I will
expedite creation of an online
toolbox for member societies.
Lastly, I will focus on
inclusion and engagement of
all otolaryngologists so that our
BOG represents the concerns of
trainees, young physicians, ex-
perienced Members, generalists,
and subspecialists.

Given the Academy’s
strategic plan, outline and
prioritize your goals for the
Board of Governors.
I have been a presenter, instructor,
journal reviewer, Millennium
Society member, and Honor
Award recipient for the Acade-
my. On behalf of all surgeons, I
will champion the BOG
representative for the
Congressional visits and pub-
lic relations committees. As
Secretary, BOG Executive Commit-
te member, and past Vice-chair
of the BOG Socioeconomic &
Grassroots Committee. I have
previously served as a mem-
ber of the Academy’s Board
of Directors and chair of the
Academy’s Young Physician’s
Section. I have also served on
the BOG Legislative Affairs and
Public Relations committees. I
have been a presenter, instructor,
journal reviewer, Millennium
Society member, and Honor
Award recipient for the Acade-
my. On behalf of all surgeons, I
have lobbied for healthcare and
liability reform on Capitol Hill
on several occasions. I have also
held leadership positions in the
American College of Surgeons,
American Medical Association,
Northwest Academy of Otolar-
yngology, American Rhinologic
Society, and American Society
of Pediatric Otolaryngology.
Through these leadership exper-
ences, I feel ready and prepared
for the role of BOG Chair.

Given the Academy’s
strategic plan, outline and
prioritize your goals for the
Board of Governors.
The AAO-HNS strategic plan
has outlined goals for advoca-
cy, education and knowledge,
research and quality, Member
engagement and unity, and
sustainability. We are at a
crossroads in medicine with
reimbursement changes, liability
threats, and healthcare reform.
Fortunately, our Academy’s
strategic plan proactively creates
programs to address these chal-
enges.

As BOG Chair, my utmost
priority would be to listen to our
Members as individuals or as
Members of state and specialty
societies to convey the state of
our specialty. I would ensure
that our Academy comprehends
the current practice climate to
heighten and facilitate imple-
mentation of the strategic plan.
More specifically, I would set
goals of developing programs in
quality, safety, and optimizing
reimbursement.

The Board of Governors
was established to provide a
broad and diverse voice for its
membership. As your BOG
Chair, I will do my best to make
sure our Academy hears that
voice.

Local/Regional
President of the Maryland
Society of Otolaryngology
BOG representative for the
Cincinnati ENT Society.
Otolaryngologists make a
difference in people’s lives every
day. There is no bigger honor
than to represent such a talented
and caring group of individuals.

Stacey L. Ishman, MD, MPH
What are your qualifications
and what is your experience?
My 13 years of BOG ser-
vice have been modeled
upon the principles
of commitment to excellence,
understanding of the issues
affecting medicine, integrity, and
passion to carry out this important
work.

My qualifications include:

BOG:
Current chair of the Rules &
Regulations Committee
Executive Committee member
since 2008
Member-at-Large
Vice-chair of the Legislative
Representative Committee
Regular attendance at biannual
meetings since 2003

Academy and Foundation
Scientific presenter
Course instructor
Author of independent research
Journal reviewer
Dynamic member of multiple
committees and initiatives
including:
General Otolaryngology
Education (Chair-elect)
Education Steering
Sleep Disorders
Outcomes Research and
Evidence-based Medicine
Guideline Taskforce
Development

ENT PAC Board (twice)
Hal Foster Society Founder
Millennium Society

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Development

Sanjay R. Parikh, MD
What are your qualifications
and what is your experience?
I have been a long-term dedi-
cated supporter and leader of
our Academy’s mission. I am
currently the elected BOG Sec-
tary, BOG Executive Committee
member, and past Vice-chair
of the BOG Socioeconomic &
Grassroots Committee. I have
previously served as a mem-
ber of the Academy’s Board
of Directors and chair of the
Academy’s Young Physician’s
Section. I have also served on
the BOG Legislative Affairs and
Public Relations committees. I
have been a presenter, instructor,
journal reviewer, Millennium
Society member, and Honor
Award recipient for the Acade-
my. On behalf of all surgeons, I
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liability reform on Capitol Hill
on several occasions. I have also
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American College of Surgeons,
American Medical Association,
Northwest Academy of Otolar-
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Society, and American Society
of Pediatric Otolaryngology.
Through these leadership exper-
ences, I feel ready and prepared
for the role of BOG Chair.

Given the Academy’s
strategic plan, outline and
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The AAO-HNS strategic plan
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Phyllis B. Bouvier, MD

What are your qualifications and what is your experience? I joined the BOG in 2007 as the representative for the Diversity Committee of the AAO-HNS. Through this committee, I helped create the AAO-HNSF Harry Barnes Society Endowed Leadership Grant. I also helped develop and present an Instruction Course and AcademyU® Module on Culturally Competent Care of the Deaf and Hard of Hearing Patient and a Miniseminar on Culturally Competent Care.

I am the Chair of the Otolaryngology Section of the National Medical Association (NMA). My chief responsibility is the development of the CME program for Otolaryngology for the Annual Meeting of the NMA.

I participate in several Academy committees: WIO Programs Committee; WIO Development/Endowment Committee; and WIO Nominating Committee. I am the Region VIII Representative to the Socioeconomic & Grassroots Committee of the BOG.

For 16 years, I have been the Colorado Representative to the Kaiser National Diversity and Inclusion Council. Our accomplishments include developing policies regarding language and demographic data collection for minority patient cohorts.

Given the Academy’s strategic plan, outline and prioritize your goals for the BOG. Our role as political advocates is extremely important, and because of our strong grassroots efforts, it has led to legislative milestones. However, we also have a role as advocates for the Academy. Many are not Members or have allowed their membership to lapse because they feel the Academy is a distant body that does not appreciate their concerns. The BOG can increase awareness and recognition of the Academy’s efforts for otolaryngologists. Through our continued efforts to engage our local and regional societies and in helping to develop connections in remote areas of the country, we can make sure that each voice is heard and communicate through various social media platforms that the Academy has to offer. Continually updating our educational platforms is essential to helping practices thrive.

Increasing Member engagement also involves actively pursuing and mentoring our young physicians. They are our true hope for sustaining our organization.

Ken Yanagisawa, MD

What are your qualifications and what is your experience? I have been actively involved with the AAO-HNS/F for 22 years and the BOG for more than eight years. Recently, in my roles as president of the CT ENT Society and the New England Otolaryngological Society; section chief of otolaryngology, Saint Raphael Campus, Yale New Haven Hospital; and currently chair of the BOG Socioeconomic & Grassroots Committee (SEGR), I have embraced the value and importance of effective communication and dialogue with Members. Organization and prioritization have been my hallmarks in leadership positions.

Within the BOG, I have participated actively in all three branches of the organization: chair and vice chair of SEGR, an active State Tracker, perennial ENT PAC Chairman’s Club donor, I-GO volunteer, and legislative activist in Connecticut; and strong advocate of state society engagement, participation, and growth. All of these valuable relationships will serve me well in fulfilling the role of BOG Secretary in Miniseminar development and continued BOG advancement.

Given the Academy’s strategic plan, outline and prioritize your goals for the BOG. Simply stated, the BOG leaders and Members are the heartbeat of our Academy. Reflecting the concerns and views of all otolaryngologists in this country, we continue to nurture strong relationships with the BOD, specialty societies, and Physician Payment Policy (3P) Workgroup, and actively encourage the Section for Resident and Fellows-in-Training (SRF), Young Physicians Section (YPS), and Women in Otolaryngology Section (WIO) participation. Every Member has an audible voice in the BOG. The robust regionalization plan is blessed with dedicated regional representatives canvassing all 10 national regions, facilitating direct accessibility for all Members. Such engagement and expansion of BOG participants will increase the strength and value of our organization.

As BOG Secretary, I will identify pertinent topics for Annual Meeting Miniseminars and Leadership Forum presentations that provide highest educational value (including continuation of CME credits) to address the mounting challenges confronting our specialty such as federal mandates and regulations, and specialty unity. I will seek improved avenues of communication to broadcast awareness of our valuable BOG offerings.
‘Do you use this?’ ‘Have you tried that?’
‘How do you do this?’
See new tech and trusted resources in Dallas

There are many ways to learn and establish a connection to the knowledge you’re seeking. There’s education in the session rooms and developing professional relationships through networking in associated activities, but most exciting is the hands-on education you can experience by visiting the OTO EXPO show floor, where you can see how the products, devices, and services can be utilized to improve your practice.

We have learned that you were asking for more unopposed time to visit the show floor. This is clearly the place to be. Whether you’re a loyal participant with many years of attendance or looking to explore our event for the first time, this OTO EXPO will be new for all parties involved. This year we have reformatted the schedule of the educational sessions to allow you more time to visit the OTO EXPO in order to see the products and technology discussed in those sessions. Imagine learning about advancements in throat surgery in one of our sessions and then easily heading to the show floor and seeing firsthand the products used in live demonstrations or hands-on for that surgery. With the OTO EXPO spread out from Hall C through Hall E of the Kay Bailey Hutchison Convention Center, here is a breakdown of what can be found throughout the halls.

Exhibit Hall C features

AAO-HNSF is always looking to enhance your Annual Meeting experience. This year your Academy has added a booth to help
engage with our Members and display ENTConnect, the official online community of AAO-HNSF. Visit Hall C of the convention center to check in at the ENTConnect booth, start your profile, and have a free headshot taken by professional photographers. Join the conversation with ENTConnect. 

**ENT Careers Live!**
 Residents and fellows-in-training: Don’t miss ENT Careers LIVE! at Booth #339 in Hall C. Our partners at HealthCareers are providing free CV reviews by healthcare professionals to benefit those entering the workforce. View more than 200 otolaryngology jobs and prepare for the AAO-HNS Career Fair on Monday, September 28, 6:00 – 8:00 pm to meet face-to-face with more than 30 employers hiring otolaryngology specialists like you.

**Posters**
Poster Presentations during the Annual Meeting provide a snapshot of the scientific research and case studies for our presenters to communicate to attendees with visual displays. This year’s Poster Presentations are intended to engage attendees in dialogue while providing a summary of the presentation that will encourage attendees to learn more. Posters will be on display in Hall C, Sunday, September 27, through Tuesday, September 29.

**Exhibit Hall E features**
**Hands-On Training**
In its debut last year, the Hands-On Training venue proved to be an incredible learning opportunity for attendees. Participating physicians receive product training in otolaryngology, led by company representatives and faculty who designed the instrumentation. These two-hour training sessions allow participants to preview the newest innovations in otolaryngology surgical tools on cadaveric specimens. Space is limited, so, make it a point to register for these sessions in advance of the show by contacting David Buckner at dbuckner@entnet.org.

**Product Theater**
Now in its third year, the AAO-HNSF Product Theater provides attendees the opportunity to extend learning beyond the session rooms with AAO-HNSF corporate sponsors. In various intervals you can review recent scientific studies and information or watch a live demonstration performed by a leader in the field of otolaryngology. Sessions are booked in conjunction with OTO EXPO™ hours and will be prominently displayed around the Exhibit Hall.

**All Exhibit Hall features**
**Quality exhibitors**
You want to get your hands on the latest products to help you deliver better patient care. Throughout halls C, D, and E you will find quality companies that deliver innovative surgical instruments, scopes, electronic billing services, robotics, and an array of medical devices for our industry. It’s imperative that you take a walk through these halls to get caught up on the latest advancements and catch great deals on many of the products you would like to use in your practice.

**The food**
You have to eat. Come to the exhibit hall to redeem your food vouchers and enjoy meals in the OTO EXPO™. Every Full or Daily conference registrant will receive a $15 meal voucher for each day they are registered to attend the conference. Vouchers can be redeemed at any concession stand in the hall during OTO EXPO™ hours, Sunday through Tuesday.

**Join us**
Get ready for Dallas this September. When you arrive for the Annual Meeting remember to plan time to visit the award-winning OTO EXPO™. Our exhibitors are there to showcase the products and services that can be used to enhance your practice. It’s truly “the place to be” for an engaging experience that you will want to take full advantage of.
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CONTINUED ON PAGE 20
Hands-on Training, which made its debut in 2014, was popular with attendees.
Members-only discounts on valuable products and services negotiated exclusively for busy AAO-HNS medical practices.

To learn more about exclusive AAO-HNS member discounts, contact David Buckner, 703-535-3718 or email: dbuckner@entnet.org

As of August 2015
2015 HOME STUDY COURSE

Registration deadline
September 9, 2015

For more Home Study Course information: www.entnet.org/hsc

Registration Fee is based on AAO-HNS membership status at the time form is received. Payment must be received by September 9, 2015, to receive 2015-2016 courses. First packet begins mailing in late August.

Address Information
- New address for HSC ONLY
- New address for ALL Academy correspondence
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AAO-HNS ID# (Please note that an AAO-HNS ID# does not automatically signify membership.)

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Online Exam
Email Required

Present Position
- Resident in Otolaryngology--HNS
  (Copies of your examination profiles will be sent to your program director)

Institution
Program Year
Program Director

- Practicing Otolaryngologist
- Other (specify)

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Enclose your check or complete credit card information below. Checks must be in U.S. dollars drawn on a U.S. bank. Credit card orders only can be faxed to 1-703-519-1570.

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Registration closes September 9, 2015
A $200 registration penalty will be applied to all registrations after September 9, 2015.

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<th>Non-member Regular</th>
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AMERICAN ACADEMY OF OTOLARYNGOLOGY--HEAD AND NECK SURGERY FOUNDATION
Empowering physicians to deliver the best patient care
Realive after five with energizing events continuing. The evenings offer an array of opportunities to round out the daily programming. Several are even included in your registration. And, if you register by Friday, August 21, your conference registration will be discounted.

You already know that changes have been made to the Annual Meeting to increase the value of your attendance. This includes all the activities that surround the meeting. For example, the AAO-HNS Career Fair and the Otolaryngology Historical Society meeting and reception times have been updated to better align with other scheduled activities. And, the First-Timers Networking event, now a breakfast, and the New Member Welcome Reception have been separated and will be held as individual sessions to better focus on each audience’s needs.

So, before heading to your hotel, plan to top off your day with one or several evening events.

**Sunday**

New Members Sunday, September 27, 5:30 – 6:00 pm
This session will give you insights on how to maximize your membership with AAO-HNS by taking advantage of all Member benefits and opportunities. Come to this session to learn about the value of the AAO-HNS, meet key leaders, and ask questions of our knowledgeable staff.

**Monday**

BOG General Assembly Monday, September 28, 5:00 – 7:00 pm
The BOG is the grassroots Member network of the AAO-HNS and is made up of local, state, regional, and national otolaryngology societies from across the U.S. and Canada. Members of the BOG are primarily community practitioners, but all Members are invited and encouraged to attend.

ENT PAC Reception
See page 8 for more information.

Career Fair Monday, September 28, 6:00 – 8:00 pm
The AAO-HNS Career Fair, hosted by ENT Careers and HEALTHecareers Network, will take place at the Omni Dallas Hotel. The AAO-HNS Career Fair provides the opportunity for candidates in all otolaryngology specialties and levels of training to speak face-to-face with hiring representatives. Employers can leverage this opportunity to personally engage with numerous qualified job seekers at one time. Job seekers, visit [http://sgiz.mobi/s3/registration](http://sgiz.mobi/s3/registration) to register and upload your resume. Employers can take full advantage of the emerging talent by contacting assocbizdev@healthecareers.com.

**Tuesday**

Corporate Satellite Symposia
Corporate satellite symposia are conducted by our corporate partners in conjunction with the Annual Meeting & OTO EXPO™. Program content is directed by the corporate sponsor and must be approved by AAO-HNSF.

Alumni Reception Tuesday, September 29, 6:30 – 8:00 pm
Visit with your friends and colleagues from other institutions, enjoy a lavish selection of delicious appetizers and treats, and be entertained by local talent. Check our website frequently at [www.entnet.org/annual_meeting](http://www.entnet.org/annual_meeting) to see the latest list of Alumni Receptions.

International Reception Tuesday, September 29, 8:00 – 10:00 pm
Registered international attendees and their spouses are invited to this reception, where AAO-HNS/F President Gayle E. Woodson, MD, will welcome international attendees, including International Guests of Honor: Czech Republic, Panama, Slovakia, Taiwan, and Tanzania. Celebrate with a DJ, dance, and enjoy delicious hors d’oeuvres. We encourage international visitors to wear national dress or a lapel pin with their country’s flag or society emblem.
The AAO-HNS New Technology Pathway process

Here’s how to apply for a new or revised CPT code


The AAO-HNS has updated its policies and procedures to address requests to create a new code, revise an existing code, or receive guidance on how to code for new technology. For the AAO-HNS statement on new technology and information about communication procedures and lobbying policies, please see the “AAO-HNS New Technology Pathway Requests Policies and Procedures” document at www.entnet.org/New-Tech-Policies-and-Procedures. The policies and procedures document requires the AAO-HNS New or Revised CPT Code Application be submitted to the Academy 180 days prior to the AMA deadline for submission of CPT proposals. For consideration at the May 2016 CPT Meeting, the Academy would need to receive the application no later than December 29, 2015.

Requests are reviewed by Jane T. Dillon, MD, MBA, Coordinator for Socioeconomic Affairs, and Co-chair for the Physician Payment Policy Workgroup (3P), who oversees the new technology pathway process, and the Academy’s CPT and RUC teams. Dr. Dillon then shares the application with the 3P workgroup, which is the senior advisory body to Academy leadership and staff on issues related to socioeconomic advocacy, regulatory activity, coding/reimbursement, and practice services/management. The 3P workgroup, including the Academy’s CPT and RUC physician leaders, evaluates inquiries. If 3P approves the application to move forward, the Academy will support the application as it moves through the CPT and RUC processes (for more information on the CPT/RUC process access: www.entnet.org/Practice/Applying-for-CPT-codes-and-Obtaining-RVU.cfm).

We are confident the AAO-HNS New Technology Pathway addresses such requests in a manner that is clearly defined, consistent with AMA CPT and RUC guidelines, accounts for the interests and perspectives of all parties involved in submitting and reviewing applications, and protects against undue influence of any group or individual, encourages the collection of reliable data, and promotes efficient, fair reimbursement for our members and appropriate access to new procedures and services for patients.

Inquiring parties, including physicians and industry representatives, should send the completed package to the Academy’s Health Policy team at www.entnet.org/content/practice-management-tool.
What otolaryngologists should consider when adopting, creating, or developing these 21st-century tools

by Manan Shah, MD, KJ Lee, MD, and Anand K. Devaiah, MD

n 2013, venture capital funding for new healthcare IT and digital-health companies outpaced investment in all other healthcare sectors, reaching nearly $2 billion. As the industry grows, otolaryngologists, like all physicians, will increasingly need to navigate and incorporate digital-health technologies. Whether you are creating a digital-health application or are looking to adopt new technology for your practice, it is important to understand how this technology is developed, and the attendant rules and regulations.

While the process of creating digital-health devices and technologies is somewhat similar to developing traditional medical devices, there are critical nuances to look out for. This article outlines how to begin the development process, how digital-health intellectual property is protected, ways to address HIPAA requirements, and what the unique FDA considerations pertaining to mobile-health applications are.

To give their perspective on this topic, the founders of two digital-health startups were interviewed: Shameet Luhar, CEO of Vheda Health, and Kyle Samani, CEO of Pristine. Vheda Health focuses on diabetic care for high-risk patients via telehealth, and Pristine creates software for telehealth using Google Glass.

What is digital-health technology?
When we hear the term “digital-health technology,” we often envision devices paired with smartphones. For example, CellScope is an iPhone case that converts your phone into an otoscope, and AliveCor is a case that transforms an iPhone into a heart monitor. But digital-health technologies encompass more than just your smartphone. Some digital-health applications focus on electronic health records, for example, focusing on organizing and storing information, sharing information across different platforms, and data encryption. Other applications analyze clinical data, and some offer clinical decision-making support or the ability to...
The effect of HIPAA on digital-health technology

Physicians are acutely aware of the Health Insurance Portability and Accountability Act, but determining whether HIPAA applies to a digital-health concept can be challenging. HIPAA regulations apply to technology that involves protected health information (PHI). Read the rest at www.entnet.org/bulletin.

FDA regulation and digital-health technology

The FDA has been reviewing mobile medical applications since 1997, but only recently did it publish final guidelines on how it will approach the regulation of digital-health technology. These guidelines have strengthened the market and eliminated much of the uncertainty for developers and investors. In short, technology that functions as a medical device—be it an application on a mobile device or a device that pairs with a mobile device—may be subject to FDA oversight if it is intended for use in the diagnosis, cure, treatment, or prevention of a disease. Read on for examples at www.entnet.org/bulletin.
Physicians who want to take a more hands-on approach and want to seriously pursue their digital-health concept might consider joining organizations that promote and nurture companies, called “accelerators.” These organizations provide access to initial funding, graphic designers, programmers, and mentors for creating technology. Mr. Luhar emphasizes their utility, “[An accelerator] allows a startup to accomplish within 12 weeks what might take a company two years.” Mr. Luhar’s company recently joined a healthcare-focused accelerator, StartUp Health of New York City. Other popular healthcare-focused accelerators include Rock Health, Healthbox, and Blueprint Health. For a more comprehensive list of healthcare accelerators, visit http://storyofdigitalhealth.com/startups.

Mind your IP

Obtaining patent protection is an essential first step. Yet, protecting your intellectual property (IP) can be more complex for digital-health technology than for traditional medical devices. Historically, copyright was a method of protecting software code; however, there is a risk of inadequate protection. Copyright protects the code in its fixed form, but does not protect the underlying idea of the work. Consequently, a competitor may only infringe your copyright if its software code is deemed “substantially similar.” Because the guidelines for what qualifies as “substantially similar” are vague, there is often opportunity for competitors to work around the copyright.

Software patents can provide broader protection for a general digital-health concept, but recently software patents have become a center of debate. Currently software can be patented, but there is much talk in the legal community about changes that may alter the patent landscape.3,4 Different types of patents can be used to help protect your IP. The graphical user interface (GUI) for a digital-health tool can be protected through design patents and can include the design of the application, the home screen, and generally whatever the user sees when interacting with the device. The appearance of novel hardware can also be protected through design patents. Utility patents can cover methods of using a device. For example, using an iPhone as an otoscope or other add-on device can be protected this way. Finally, methods of doing business can be patented as well, such as novel ways of interacting with patients or insurance companies or streamlining clinic workflows. However, the law regarding business method patents is currently in flux, so it is important to seek an experienced IP attorney for these types of innovation.

It is just as important, if not more important, to make sure that producing your concept will not violate someone else’s intellectual property rights. Just because you haven’t seen your innovation on the market doesn’t mean that someone else has not already patented it. Because it is often difficult to determine whether your technology infringes existing patents, we recommend using a qualified patent attorney. While some software entrepreneurs forego patents completely, Mr. Samani of Pristine notes that patents are vital in the healthcare space. Having patents can positively affect later fundraising opportunities. “As an entrepreneur, it is worth the investment to at least file a provisional patent application, because a significant amount of investors won’t even invest without IP protection,” advises Mr. Samani.

References

8. Lee KJ. Electronic medical records (EMR)—the train has left the station. ENT News. 16(3) 45-46; July/August 2007.
Advanced TNE & Procedures Course

This exciting course will offer beyond state-of-the-art training in office-based unsedated esophagoscopy and advanced procedures. Topics that will be covered include contemporary indications and techniques of TNE, transnasal balloon dilation of the esophagus and airway, office-based injection medialization, office TEP, and radio frequency energy delivery to the LES (STRETTA) as a treatment of reflux disease. This course is both didactic and a workshop with hands on practice with models.

Wednesday, October 14, 2015
8:00 a.m. - 4:00 p.m.
UPMC Mercy Hospital
Pittsburgh, Pennsylvania

Held in conjunction with the Fall Voice Conference and sponsored by the National Foundation of Swallowing Disorders.

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*Limited space is available

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Otolaryngologist/Subspecialty Interests Welcome

ProHealth Physicians is currently seeking an Otolaryngologist to join an established ENT practice in Bristol, Connecticut. Bristol is the home to ESPN and is a suburban community conveniently located 30 minutes from the cities of Hartford/New Haven CT and halfway between New York City and Boston Massachusetts (2 hours to either city). The surrounding area has excellent school systems and ample recreational opportunities.

Currently the group has 4 ENT physicians including subspecialists in rhinology and otology. Interest is in a comprehensive otolaryngologist, but complementary subspecialty interests are welcomed. Excellent compensation and benefits package offerings.

Forward CV to Debra Colaci
ProHealth Physician Recruiting
860-409-4077 (Fax)
dcolaci@prohealthmd.com

ProHealthMD.com

Pittsburgh Ear Research Foundation
Division of Otology Research and Neurotology
Allegheny General Hospital, Pittsburgh, Pennsylvania

Presents
Temporal Bone and Microanatomy Hands-on Dissection Workshop

October 23 & 24, 2015

This workshop is intended for otolaryngologists interested in the most recent development in temporal bone surgical techniques.

Registration fee: $450
Location: Allegheny General Hospital, Pittsburgh, Pennsylvania
Course Co-Directors: Douglas A. Chen, MD, FACS
Todd A. Hillman, MD

For additional information, please contact Allegheny General Hospital, Continuing Medical Education by e-mail to cme@agh.org, by phone at 412-359-4952, or by fax at 412-359-8218. To download a brochure or to register online, please visit our Web site at www.aghcme.org. Select Conference Schedule on the left, then scroll until you find the appropriate Temporal Bone Course.

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If these types of benefits make sense, we are eager to hear from you. Please reach out, with any comments or questions, directly to:

Robert P. Green, MD, FACS
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For more information contact Carlos Lopez at 516.220.6448 or nyents@optonline.net

**On-site interviews will be available at the AAO-HNSF Annual Meeting & OTO EXPOSM in Dallas**
CPOP
Certificate Program for Otolaryngology Personnel

The CPOP program is a three-phase training program to teach basic hearing evaluation
This 3-phase program is designed to be a cost-effective way to increase office efficiency and provide basic audiology services. OTOtechs allow audiologists to provide advanced hearing and balance services.

Each CPOP registrant must be sponsored by an otolaryngologist who will provide guidance and oversight. The otolaryngologist is responsible for monitoring the OTOtech’s progress and specifying the role of the tech in the office.

The 3 phases of training are: 1) self study; 2) hands-on workshop; and, 3) 6-month period of supervised patient testing. A Certificate of Completion will be issued after satisfying requirements.

Important Note: In June 2010, CMS clarified the Medicare policy on billing for audiology services. Not all services learned in this course are eligible for Medicare reimbursement in most states. Most commercial insurances do reimburse for services provided by OTOtech staff.

October 9 - 11, 2015: Providence Park Hospital, Novi, Michigan

For Information, contact:
Alison Devine
Michigan Ear Institute
248-865-4135 • earmei@aol.com
Registration Deadline: September 11, 2015
Fee: $1500 (includes course materials and 2-1/2 day workshop). Travel & Lodging not included.
http://www.michiganear.com/conferences-and-courses.html
Co-coordinators:
Eric Sargent, MD (Michigan Ear Institute) & Jeffrey Weingarten, MD (Ear, Nose & Throat Consultants)

Licensed program of the American Academy of Otolaryngology - Head and Neck Surgery.

The UNIVERSITY OF ARIZONA
COLLEGE OF MEDICINE TUCSON
Otolaryngology - Head & Neck Surgery

Head and Neck and/or Microvascular Reconstructive Surgeon

The Department of Otolaryngology – Head and Neck Surgery, at the University of Arizona (UA), College of Medicine (COM) in Tucson, Arizona is seeking a fellowship-trained, board-certified head and neck and/or microvascular reconstructive surgeon at the Assistant/Associate Professor/Professor level.

The Department has rapidly grown to offer the full breadth of quaternary Otolaryngology – Head and Neck Surgery. Currently, the department consists of 9 clinical faculty and 3 basic science faculty. We have been continuously funded by the NIH and have steadily expanded our residency and fellowship programs.

Join us during this exciting period of growth. The University COM has recently merged with Banner Health, a $6 billion organization with a hospital network that encompasses all of Arizona, and parts of Colorado and Alaska. There is a tremendous opportunity to establish a state-wide academic program. The University of Arizona and Banner University Medical Center (BUMC) are located in Tucson, Arizona. The Arizona Cancer Center, an NCI designated comprehensive cancer center, is on the BUMC campus as a fully integrated program offering state-of-the-art cancer treatment and research.

The department is seeking an individual who is able to work with diverse students and colleagues, and who has experience with a variety of teaching methods and curricular perspectives. The UA is an EEO/AA Employer.

Apply online at www.nacareertrack.com; Job posting 58293.

For additional inquiry, please email and attach a CV to:
Alexander Chiu, M.D., Professor and Chair
Department of Otolaryngology-Head and Neck Surgery
achiu@oto.arizona.edu
The Division of Head and Neck surgery in the Department of Otolaryngology - Head & Neck Surgery at Emory University School of Medicine, Atlanta, GA seeks to add a fellowship-trained Head and Neck ablative and microvascular reconstructive surgeon at the rank of Assistant or Associate Professor. Duties will include resident and fellow teaching and a clinical practice primarily involving mucosal tumors of the upper aerodigestive tract and microvascular reconstruction.

Our current practice features four full-time, fellowship-trained Head and Neck Surgeons and a new, state-of-the-art Head and Neck Clinic on the campus of Emory University Hospital Midtown. Multidisciplinary care in conjunction with Winship Cancer Center includes exceptional Medical and Radiation Oncology as well as the full complement of ancillary services. Applicants must be Board Certified or Board Eligible.

Compensation will be commensurate with experience.

Interested applicants should forward letters of inquiry and curriculum vitae to:

Mark W. El-Deiry, MD, FACS
Associate Professor and Chief of Head and Neck Surgery
Department of Otolaryngology - Head & Neck Surgery
550 Peachtree Street, Medical Office Tower, Suite 1135
Atlanta, Georgia 30308
Fax: 404-778-2109   •   Email: meldeir@emory.edu

An Equal Opportunity / Affirmative Action Employer. Qualified minority and female applicants are encouraged to apply.

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The Division of Otolaryngology - Head & Neck Surgery at Penn State Milton S. Hershey Medical Center seeks a full-time BC/BE Laryngologist. Appointment will be at the Assistant/Associate Professor level. Qualified candidates must have completed an approved residency program and be fellowship-trained to provide clinic and hospital-based laryngology care for patients. This will include treatment of the professional voice, endoscopic surgical procedures, voice restoration, and airway reconstruction.

The Penn State Milton S. Hershey Medical Center is a tertiary care facility that serves central Pennsylvania and northern Maryland. We are a part of a non-profit health organization that provides high-level patient services. Our division is part of a state-of-the-art, 551-bed medical center, a Children’s Hospital, Cancer Center, research facilities, and outpatient office facilities. Penn State Hershey is the only Level I Trauma Center in Pennsylvania accredited for both adult and pediatric patients.

Join a growing team of clinical providers with the resources of one of the leading academic medical centers in the nation. Competitive salary and benefits.

For immediate consideration, please send curriculum vitae to:

David Goldenberg, M.D., F.A.C.S.
Chief, Division of Otolaryngology - HNS
Penn State Milton S. Hershey Medical Center
500 University Drive, MCH091
Hershey, PA. 17033-0850
E-mail: jburchill@hmc.psu.edu

Dartmouth-Hitchcock

The Dartmouth-Hitchcock Manchester Department of Otolaryngology is seeking a BC/BE ENT to join its collaborative and collegial team of three physicians, one PA and three audiologists. This is a new position due to the rapid expansion of our practice. Our premier group delivers a broad range of ENT, allergy and surgical services.

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Consistently in the top 5 most livable states (CQ Press), New Hampshire has no state income or sales tax and a cost of living that is among the lowest in New England. Our practice locations are less than an hour from Boston, the sea shore, lakes and mountain regions. Four-season living with year round recreation, a myriad of cultural events and venues and highly-ranked schools offer something for everyone.

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To apply- please send CV with letter of interest to:
Frances.Lannan@hitchcock.org
www.DHProviders.org

Dartmouth-Hitchcock is an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, veteran status, or any other characteristic protected by law.

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**Academic Otolaryngologist**

UMassMemorial Medical Center, the clinical partner of the University of Massachusetts Medical School in Worcester, MA, is seeking BC/BE

1) **General Otolaryngologist**

Join an established group of 6 physicians in a busy tertiary care referral center. Responsibilities include clinical care as well as student and resident education. Opportunities exist for clinical and basic science investigation and research. An academic appointment commensurate with education and training is offered. We are looking for dynamic new or recent graduates with energy, desire, and drive to jump start their careers and help expand our scope and presence. UMassMemorial Medical Center is situated in Worcester, MA, a community rich in history. Worcester is the second largest city in Massachusetts and New England, and has a very large patient referral base. Worcester and the surrounding area have a strong and diverse economic base with family oriented communities and excellent school systems. Boston and Providence are only forty miles away, and beaches, lakes, and mountains are all easily accessible.

For consideration and/or additional details, please submit your CV and Letter of Introduction to:

Daniel Kim MD
Department of Otolaryngology-Head and Neck Surgery
UMassMemorial Medical Center
c/o Jennifer Pappas,
Physician Recruiter
Email: jennifer.pappas@umassmemorial.org
Phone: 774-312-0483

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**Division of Otolaryngology - Head and Neck Surgery**

UMassMemorial Medical Center and the University of Massachusetts Medical School are equal opportunity employers.
Assistant, Associate or Full Professor of Comprehensive Otolaryngology Division
Stanford University School of Medicine Department of Otolaryngology-Head and Neck Surgery

The Division of Comprehensive Otolaryngology in the Department of Otolaryngology-Head and Neck Surgery at Stanford University School of Medicine seeks a board-certified Otolaryngologist to join the department as an Assistant Professor, Associate Professor or Full Professor in either the Medical Center Line or the Clinician Educator Line. Faculty rank will be determined by the qualifications and experience of the successful candidate.

The predominant criteria for appointment for faculty in the Medical Center Line shall be excellence in the overall mix of clinical care, clinical teaching, scholarly activity that advances clinical medicine and institutional service appropriate to the programmatic need the individual is expected to fulfill. The major criteria for appointment for faculty in the Clinician Educator Line shall be excellence in clinical care and clinical teaching.

The successful applicant should be board eligible or board certified in Otolaryngology-Head and Neck Surgery.

We expect the successful candidate to develop an active clinical practice in general otolaryngology, be an active teacher of medical students and residents, oversee the clinical program, and (for MCL) maintain an excellent clinical and/or translational research program.

Qualified applicants, based on merit and experience, will also be considered for the position of division chief. The successful applicant will have proven leadership and research potential, as well as sound clinical judgment and surgical expertise.

Stanford University is an equal opportunity employer and is committed to increasing the diversity of its faculty. It welcomes nominations of and applications from women, members of minority groups, protected veterans and individuals with disabilities, as well as from others who would bring additional dimensions to the university’s research, teaching and clinical missions.

Submissions will be reviewed beginning March 3, 2015 and accepted until position is filled.

Submit curriculum vitae, letter of inquiry and the names and addresses of three references to:

Lori Abrahamsohn
Faculty Affairs Administrator
Department of Otolaryngology-Head and Neck Surgery
801 Welch Road, Stanford, CA 94305
labrahamsohn@ohns.stanford.edu
650-725-6500 (phone) 650-725-8502 (fax)
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North Carolina

Busy six physician single-specialty ENT private practice is currently seeking a Board Certified/Board Eligible otolaryngologist to join the practice. The practice focuses on quality care and an excellent patient experience at our well-equipment center.

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With a long-standing practice, there is a broad referral base and great opportunity for the physician. Head and neck fellowship is desired but not required. We offer a competitive salary, productivity bonus incentive, generous benefits package, along with partnership opportunities and possible loan forgiveness.

Modern, spacious office includes allergy, audiology, video stroboscopy with speech language pathology and onsite CT. A large university in town offers numerous performing arts events as well as other activities. The proximity to the coast makes for easy and frequent opportunities to explore and enjoy.

Please send letter of inquiry to:
Office Manager
Eastern Carolina Ear, Nose & Throat – Head & Neck Surgery, PA
P.O. Box 5007
Greenville, NC 27835

Full Time Academic Faculty Positions

The Indiana University School of Medicine (IUSM) Department of Otolaryngology-Head & Neck Surgery in Indianapolis, Indiana is seeking full time BC/BE faculty physicians to join its comprehensive and growing department. Our department is dedicated to providing the highest quality medical care; educating students, residents, fellows, and physicians in the field of Otolaryngology-Head & Neck Surgery and related disciplines; and performing research regarding disorders within our specialty. The IUSM Department of Otolaryngology-Head & Neck Surgery is renowned as one of the best in the nation. Our faculty physicians are nationally and internationally recognized as clinical experts, and our scientists and clinician-investigators perform a broad range of research including infant speech perception, stem cell research in the auditory system, neurofibromatosis pathophysiology, and peripheral nerve regeneration. Our future goals include expansion of our clinical programs across Indiana, and building on the strengths of the IU otolaryngology program in hearing, as well as furthering the department’s translational programs in head and neck cancer.

Head and Neck Oncologic Surgeon
Candidate must be fellowship-trained in head and neck surgery. Responsibilities include participation in an established and robust practice that emphasizes multidisciplinary management of complex head and neck cancer patients.

General Otolaryngologist-Head and Neck Surgeon
Candidate must be trained in all aspects of otolaryngology-head and neck surgery. Responsibilities include participation in an active general otolaryngology practice.

In additional to clinical duties, responsibilities for both positions include the teaching of surgical residents and medical students in an institution committed to education excellence. Rank and salary will be commensurate with level of experience.

Interested candidates should submit CV and arrange to have three letters of reference sent to:

Marion Everett Couch, MD PhD MBA
Richard T. Miyamoto Professor and Chair
Department of Otolaryngology – Head & Neck Surgery
Indiana University School of Medicine
Gatch Hall • 1120 W. Michigan St, Suite 200 • Indianapolis, IN 46202 • smaxwell@iupui.edu

Indiana University is an EEO/AA employer, M/F/D/V.
Otolaryngologist Opportunity in Toledo, Ohio

ProMedica Physicians Ear, Nose and Throat is seeking highly motivated, personable BC/BE otolaryngologists to join their progressive and expanding practice. The practice consists of six ENT physicians and is the only ENT practice in Toledo with fellowship-trained otolaryngologists in head and neck surgical oncology and neurotology. We offer a full range of services including allergy testing and treatment, and complete audiology and vestibular services including ENG, rotary chair, posturography, and cochlear implantation and mapping.

We are seeking candidates who excel at general ENT or with advanced subspecialty interest and fellowship-trained in head and neck surgical oncology and laryngology.

• Full employment with ProMedica Physicians
• "Built in" referral base and high volume
• Call shared equally among all members (currently 1:6)
• Trauma call is optional and paid separately
• Opportunity for teaching residents and medical students
• All members participate in weekly board meetings
• Competitive compensation and generous benefits package
• Relocation paid up to $10K
• Perfect balance of work and lifestyle

Toledo, Ohio is home to an extensive Metropark system, Toledo Zoo, Toledo Museum of Art, and excellent institutions of higher education.

Contact: Denise Johnston, physician recruiter, at 419-824-7445, denise.johnston@promedica.org.

ProMedica is a tobacco-free employer. EOE © 2014 ProMedica
The Division of Rhinology, Sinus, and Skull Base surgery in the Department of Otolaryngology - Head & Neck Surgery at Emory University School of Medicine, Atlanta, GA seeks to add a fellowship-trained Rhinologist at the rank of Assistant or Associate Professor. Duties will include resident and fellow teaching, academic productivity, and a tertiary care clinical Rhinology practice involving primary and revision inflammatory sinus disease and endoscopic skull base surgery with a very busy endoscopic transphenoidal skull base surgery practice.

Our current practice features two full-time Rhinologists at our state-of-the-art Rhinology and Allergy clinic on the campus of Emory University Hospital Midtown. This position involves stepping into a recently vacated faculty position that will be immediately busy. Applicants must be Board Certified or Board Eligible. Compensation will be commensurate with experience.

Interested applicants should forward letters of inquiry and curriculum vitae to:

John M. DelGaudio, MD
Vice Chair and Gerald S. Gussack, MD Endowed Professor of Otolaryngology: Head and Neck Surgery
Chief of Rhinology and Sinus Surgery
Director- Emory Sinus, Nasal and Allergy Center
Department of Otolaryngology - Head & Neck Surgery
550 Peachtree Street, Medical Office Tower, Suite 1135
Atlanta, Georgia 30308
Fax: 404-778-2109 • Email: jdelgau@emory.edu

An Equal Opportunity / Affirmative Action Employer.
Qualified minority and female applicants are encouraged to apply.
EOP # 34944BG

The Division of Pediatric Otolaryngology at the Children’s Hospital of San Antonio-Baylor College of Medicine seeks an energetic, fellowship-trained Pediatric Otolaryngologist interested in building an academic program in a community-hospital setting. The qualified applicant will join three fellowship-trained Pediatric Otolaryngologists at the only free standing children's hospital in San Antonio and will serve an integral role in developing clinical programs, teaching residents, and providing exceptional care to the children of South Texas. Assistant and Associate Professor levels preferred, and any area of pediatric otolaryngology subspecialty interests are encouraged.

Interested applicants should send CV and letter of intent to:

Lisa Buckmiller MD, Chief Pediatric Otolaryngology
Children's Hospital of San Antonio
315 N. San Saba, Suite 1003
San Antonio, TX. 78207
(210) 704-3391
Lisa.Buckmiller@christushospital.org

Washington University in St. Louis
SCHOOL OF MEDICINE

Full Time Academic Faculty Position Available

PEDIATRIC OTOLARYNGOLOGIST
The Department of Otolaryngology-Head and Neck Surgery is seeking a fellowship trained pediatric otolaryngologist. Applicants must be board certified in Otolaryngology. The Division of Pediatric Otolaryngology provides otolaryngology services at St. Louis Children’s Hospital and our new ambulatory Children’s Specialty Care Center just 10 miles west of St. Louis Children’s Hospital opening June 1, 2015. Clinical responsibilities will include inpatient and outpatient responsibilities within the Department of Otolaryngology at St. Louis Children’s Hospital. Clinical program highlights include the Cochlear Implant Program which is one of the two largest in the country. U.S. News and World Report named St. Louis Children’s Hospital to its Honor Roll of America’s Best Children’s Hospitals and recognized by U.S. News for seven consecutive years. Applicants are invited to send their curriculum vitae to: Keiko Hirose, M.D., Chief of Pediatric Otolaryngology, Washington University School of Medicine, 660 S. Euclid, Box 8115, St. Louis, MO 63110, Phone: 314-454-4033, Fax: 314-454-2174, hirosek@ent.wustl.edu.

Washington University is an affirmative action and equal opportunity employer.
The Indiana University School of Medicine (IUSM) Department of Otolaryngology-Head & Neck Surgery in Indianapolis, Indiana is seeking full time BC/BE Fellowship trained faculty physicians to join our comprehensive and growing department. Our department is dedicated to: providing the highest quality medical care; educating students, residents, fellows, and physicians in the field of Otolaryngology-Head & Neck Surgery and related disciplines; and performing research regarding disorders within our specialty. The IUSM Department of Otolaryngology-Head & Neck Surgery is renowned as one of the best in the nation. Our faculty physicians are nationally and internationally recognized as clinical experts and our scientists and clinician-investigators perform a broad range of research including infant speech perception, stem cell research in the auditory system, neurofibromatosis pathophysiology, and peripheral nerve regeneration. Our future goals include expansion of our clinical programs across Indiana, and building on the strengths of the IU otolaryngology program in hearing as well as furthering the department’s translational programs in head and neck cancer.

Full Time Academic Faculty Positions

The Indiana University School of Medicine (IUSM) Department of Otolaryngology-Head & Neck Surgery in Indianapolis, Indiana is seeking full time BC/BE Fellowship trained faculty physicians to join our comprehensive and growing department. Our department is dedicated to: providing the highest quality medical care; educating students, residents, fellows, and physicians in the field of Otolaryngology-Head & Neck Surgery and related disciplines; and performing research regarding disorders within our specialty. The IUSM Department of Otolaryngology-Head & Neck Surgery is renowned as one of the best in the nation. Our faculty physicians are nationally and internationally recognized as clinical experts and our scientists and clinician-investigators perform a broad range of research including infant speech perception, stem cell research in the auditory system, neurofibromatosis pathophysiology, and peripheral nerve regeneration. Our future goals include expansion of our clinical programs across Indiana, and building on the strengths of the IU otolaryngology program in hearing as well as furthering the department’s translational programs in head and neck cancer.

**Pediatric Otolaryngologist**
- Candidate must be fellowship-trained in all aspects of pediatric otolaryngology surgery.
- Responsibilities include participation in an active pediatric otolaryngology practice, and teaching residents and medical students. Rank and salary will be commensurate with level of experience.

**Laryngologist**
- Candidate must be fellowship-trained in treating all aspects of voice, swallowing and airway disorders.
- Responsibilities include participation in an active laryngology practice, and teaching residents and medical students. Rank and salary will be commensurate with level of experience.

Interested candidates should submit CV and arrange to have three letters of reference sent to:
Marion Everett Couch, MD PhD MBA
Richard T. Miyamoto Professor and Chair
Department of Otolaryngology – Head & Neck Surgery
Indiana University School of Medicine
Gatch Hall • 1120 W. Michigan St, Suite 200 • Indianapolis, IN 46202 • smaxwell@iupui.edu

SCHOOL OF MEDICINE

INDIANA UNIVERSITY

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The largest otolaryngology group in Central Florida, which offers a full array of subspecialty care including emphasis in general otolaryngology, pediatric and head and neck surgery, is seeking several partners. We offer the best of private practice with opportunities for academic pursuits. Integrity, quality and camaraderie are our core values.

We offer an excellent salary, benefits, partnership and the opportunity to teach residents and medical students.

Orlando is a world destination offering a variety of large city amenities and is a short drive to both the East and West Coasts of sunny Florida.

For more information, visit us online at www.entorlando.com.

Interested candidates should send CV to or may contact:
Debbie Byron, Practice Administrator
Phone: 407-342-2033
E-Mail: dbyron@entorlando.com

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Otologist/Neurootologist
FULL-TIME BC/BE FACULTY

The Department of Otolaryngology at UTMB Health in Galveston, Texas is actively recruiting enthusiastic candidates for a full-time position. This job entails opportunities to participate in all aspects of clinical practice, as well as resident and medical student teaching. UTMB Health is undergoing rapid growth as exemplified by the building of two cutting-edge surgical hospitals and the acquisition of a third. With a light call schedule and generous benefits, this is an outstanding opportunity in one of the fastest growing geographic regions in the country. Clinical research is encouraged but not mandatory.

Please direct your Letter of Interest and CV to
Vicente Resto, MD, PhD, FACS
Chair, Department of Otolaryngology
The University of Texas Medical Branch,
301 University Boulevard, Galveston, TX 77555-0521
Email: vresto@utmb.edu
Phone: 409-772-2701 Fax: 409-772-1715

UTMB is an equal opportunity, affirmative action institution which proudly values diversity. Candidates of all backgrounds are encouraged to apply.

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The largest otolaryngology group in Central Florida, which offers a full array of subspecialty care including emphasis in general otolaryngology, pediatric and head and neck surgery, is seeking several partners. We offer the best of private practice with opportunities for academic pursuits. Integrity, quality and camaraderie are our core values.

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For more information, visit us online at www.entorlando.com.

Interested candidates should send CV to or may contact:
Debbie Byron, Practice Administrator
Phone: 407-342-2033
E-Mail: dbyron@entorlando.com

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Vicente Resto, MD, PhD, FACS
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The University of Texas Medical Branch,
301 University Boulevard, Galveston, TX 77555-0521
Email: vresto@utmb.edu
Phone: 409-772-2701 Fax: 409-772-1715

UTMB is an equal opportunity, affirmative action institution which proudly values diversity. Candidates of all backgrounds are encouraged to apply.
South Florida ENT Associates, a fifty-two physician group practice in Miami-Dade, Broward and Palm Beach has immediate openings for full-time ENT Physicians. South Florida ENT Associates is the second largest ENT group in the country and the largest in the state of Florida. We provide full service ENT including Audiology, Hearing Aid Sales, Allergy, Facial Plastics, Robotics and CT services.

We offer an excellent salary/bonus with partnership track, health insurance, paid vacation time, malpractice insurance and CME reimbursement, plus other benefits.

Candidate must have strong clinical knowledge, excellent communication skills, be highly motivated and hardworking.

This position will include both office and hospital settings.

Requirements:
- Board Certified or Eligible preferred
- MD/DO from approved medical/osteopathy school and graduation from accredited residency program in ENT
- Current Florida license
- Bilingual (English/Spanish) preferred
- Excellent communication and interpersonal skills
- F/T - M-F plus call

For more information about us, please visit www.sfenta.com.

Contact Information:
Contact name: Stacey Citrin, CEO
Phone: (305) 558-3724 • Cellular: (954) 803-9511
E-mail: scitrin@southfloridaent.com
Rush University Medical Center, Chicago
Rhinologist

The Department of Otorhinolaryngology Head & Neck Surgery at Rush University Medical Center located in downtown Chicago is seeking applicants for a faculty member to join our Section of Rhinology, Sinus Surgery, & Skull Base Surgery. The selected individual will have an opportunity to join a department of 11 full-time faculty spanning the entire spectrum of otolaryngology subspecialties. Qualified candidates must have completed a fellowship in Rhinology as well as possess a strong commitment to patient care, resident education, and research. The individual will be a key part of the Sinus, Allergy and Asthma institute at Rush as well as a vital member of the Rush Center for Skull Base and Pituitary Surgery. Previous proven research experience in these subspecialty areas is preferred. Consistent with Rush’s mission, the University and Department place a premium on high quality teaching, therefore, it is expected that this candidate would also be devoted to participation in supervision and education of residents and medical students. Candidates should be eligible for faculty appointment at the Assistant or Associate Professor level.

Rush University Medical Center is a large tertiary academic medical center located in downtown Chicago that encompasses a 664-bed hospital serving adults and children, including the Johnston R. Bowman Health Center and a new 376-bed hospital building known as the Tower. The Medical Center offers more than 70 highly selective residency and fellowship programs in medical and surgical specialties and subspecialties. Rush is consistently ranked as one of the nation’s top hospitals by U.S. News & World Report. Rush is ranked in 7 of 16 categories in U.S. News & World Report’s 2014-2015 “America’s Best Hospitals” issue, and is one of the two top-ranked hospitals in Illinois overall. Rush was the first hospital in Illinois serving adults and children to receive Magnet status – the highest honor in nursing – and the first in Illinois to earn a third four-year designation.

For further inquiries, please contact:

Pete S. Batra, MD, FACS
Professor and Chairman
Pete_Batra@rush.edu

Darrell Sparkman
Faculty Recruiter
Darrell_Sparkman@rush.edu

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