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The official member magazine of the **American Academy of Otolaryngology-Head and Neck Surgery**

AUGUST 2018

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22

2018 **Board of Governors**
candidate statements

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#OTOMTG18:
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AUGUST 2018
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President
Gavin Setzen, MD
Executive Vice President, CEO, and Editor of the Bulletin
James C. Denny III, MD
Managing Editor
Jeanne McIntyre, CAE
bulletin@entnet.org

INQUIRIES AND SUBMISSIONS
bulletin@entnet.org

MAILING INFORMATION
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Suzee Dittberner
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Overland Park, KS 66212
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Fax: 1-913-344-1492
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Professionalism and humanitarianism

Throughout history, medicine has advanced faster and faster, and with it the capacity not just to overcome sickness, but to transform the nature of life itself. From the clearly defined conviction of the Hippocratic Oath to the complex, perplexing, and confounding ethical dilemmas of modern-day medicine, we strive to continue to **enhance the art, culture, and science of medicine** to the benefit of mankind.

We live and work in a digital era and the Internet of Things where augmented reality, virtual reality, machine learning, and artificial intelligence (AI) are proliferating, impacting healthcare education, reform, and delivery. While there is much excitement and promise in the contemporary evolution of healthcare, there is also some concern about the potential negative impact that these advances might have on the doctor-patient relationship ... our core contract with our patients.

I believe that these concerns are somewhat tempered by the widely held view that AI cannot supplant human intelligence and our marrow-deep commitment as physicians and clinicians to **properly care for our patients** and those less fortunate than us around the world.

For the purposes of this article, I would like to suggest an alternative definition for the acronym AI—**Altruistic Inclination**, something I believe is inherently important to those pursuing a career in healthcare. We are blessed to live and work in a country where, for the most part, resources are plentiful, and most patients have access to healthcare. We are also fortunate to have access to many educational opportunities, including those that prepared us for a career in medicine and the healing arts. It is also important to remember that access to healthcare technology and basic needs for providing care are not available on a global basis.

We have a unique opportunity to further our altruism and humanism. Humanism has been defined as encompassing a **spirit of sincere concern for the centrality of human values** in every aspect of professional activity. Caring for our fellow human beings requires sensitivity and empathy, coupled with kindness, concern, and compassion for those near and far, in the United States and globally, consistent with the AAO-HNSF vision.

Imagine turning patients away because you don't have surgical gloves to treat them or not being able to perform life-changing surgery on a child because you don't have the correct instruments or supplies. This

happens every day in places around the world. But you can help to change that.

The AAO-HNSF is spearheading a **medical supplies and device donation drive** in conjunction with the AAO-HNSF 2018 Annual Meeting & OTO Experience. This humanitarian effort, which runs from now through December 31, 2018, is being done in collaboration with MedShare, headquartered in Atlanta, Georgia, dedicated to improving the "quality of life of people, communities, and our planet" by sourcing and directly delivering surplus medical supplies and equipment to communities in need around the world.

The **AAO-HNSF Otolaryngology United for Global Patient Care** initiative encourages members to contribute to this donation effort. This further highlights the AAO-HNSF commitment to improving global otolaryngology care in communities around the world.

Eugene N. Myers, MD, Past President of the AAO-HNSF and founding AAO-HNSF International Coordinator, said, "Help is always needed in hospitals and clinics around the world, and we need to encourage ways to provide that assistance. Not only do we have to get the word out that being generous and being a humanitarian feels good, but we have to inform members that there are mechanisms by which doctors can be generous and partake in these humanitarian efforts. I admire what the Foundation is doing."

Mark E. Zafereo, MD, Chair of the AAO-HNSF Humanitarian Efforts Committee, added that "We have a real opportunity to respond to a global need by eliminating waste and sharing our resources with our international colleagues abroad."

These sentiments are at the heart of this endeavor, initiated by the Humanitarian Efforts Committee. However, the involvement and participation of the entire specialty—**We Are One**—is needed for it to succeed. There are a number of ways you can donate to this effort via MedShare's three regional distribution centers across the U.S.

Use the form at www.medshare.org/donate-medical-supplies/ to get started and be sure to name the AAO-HNSF drive on the form.

We are blessed; wake up every morning and vigorously pursue your passion, your mission, and your vocation in life. And take this opportunity to further your charitable endeavors and make an impact, even a small difference in someone's life miles away ... continuous, never-ending opportunities to heal the world!

Happy are they who are charitable at all times.

—Psalms 106:3 ■



Gavin Setzen, MD
AAO-HNS/F President

“Humanism has been defined as encompassing a spirit of sincere concern for the centrality of human values in every aspect of professional activity.”

”



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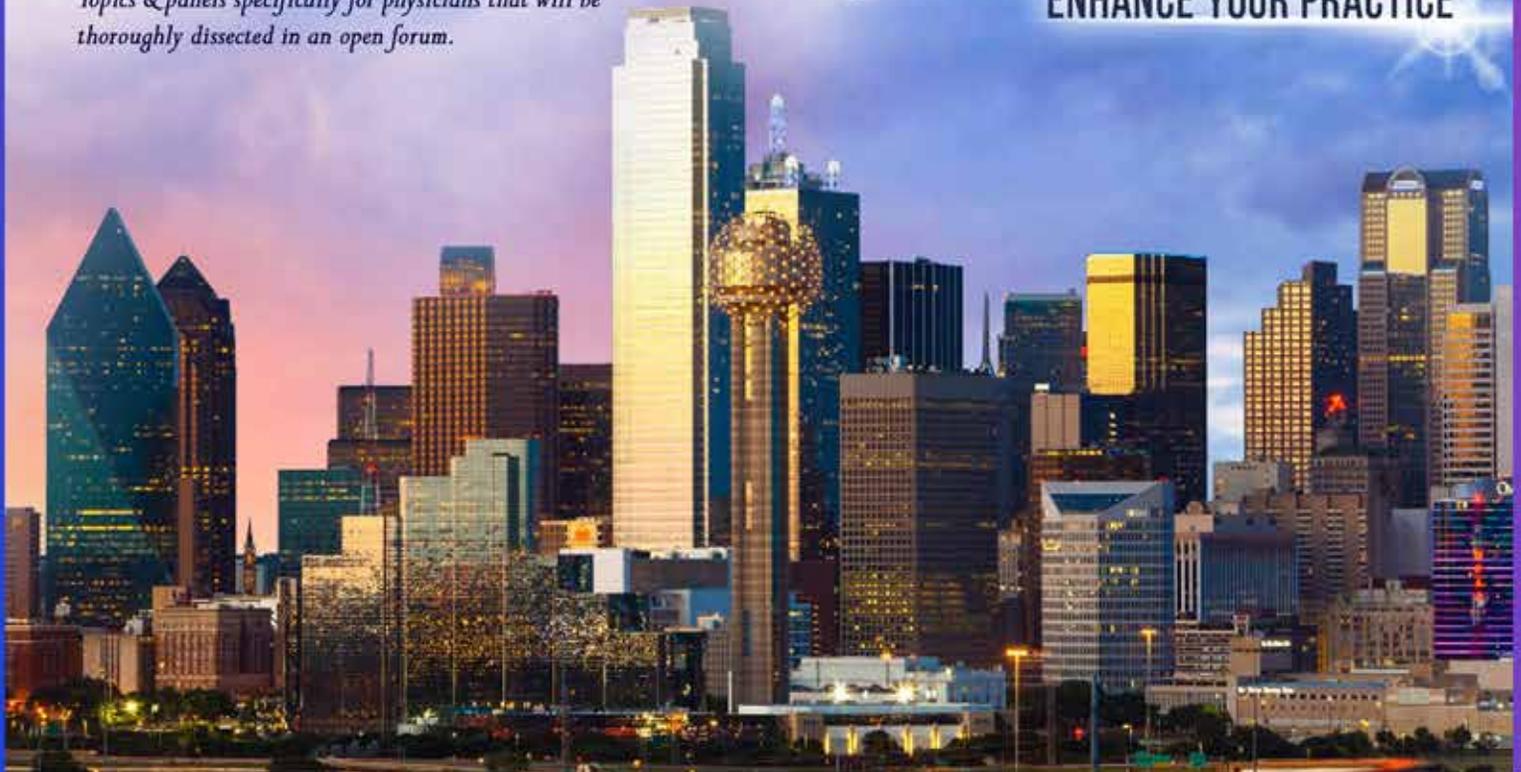
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Partnerships will get us there

Our predecessor organization originated 122 years ago based on the desire to improve patient care through the mutual sharing of clinical information by physicians not only in the United States, but also globally. Education activities formed the basis for professional associations for many years. Even as the demand and necessity for additional services have arisen as the delivery of health care has evolved, education has remained an anchor function of our organization. Our Foundation takes great pride in providing the highest quality education programs related to otolaryngology, as evidenced by our ACCME accreditation at the highest level. Advancements in the field of education in terms of theory, process, targeted learners, and dissemination of education products have made it clear that optimal results will require active interaction with a variety of partners. As we work to structure principles of interactive, shared learning that incorporate tools such as animation, digitization, gamification, simulation, and a Learning Management System that supports dissemination through all current media, we welcome partners. There are three significant areas in which the Foundation is working with others with similar interests to produce the best possible results.

I recently attended the “Future of Surgical Training” Conference in Chicago, IL, that was hosted by the American College of Surgeons. Representatives from all the surgical specialties were present. I was impressed with the breadth and depth of discussion regarding all aspects of surgical training and individual reports from each specialty detailing the specific nuances and challenges they face. One area of consensus centered around the need to improve the understanding of expectations between academic faculty and resident trainees in surgical programs. The creation and delineation of shared goals are necessary to traverse the new training paradigm that exists today. Our Faculty Development Program is designed to help “train the trainer” and currently contains material on developing outcome objectives, effective presentations, and adult learning principles. Later this year, the Foundation will release the next set of courses, including conscious and unconscious bias, how to effectively run a meeting, how to review and critique scientific articles, and a primer on simulation and how it is being used in our training programs, as well as future possibilities.

The ACCME has long supported the goals of Maintenance of Certification (MOC) and the importance of alignment between accredited CME and MOC. We applaud the American Board of Otolaryngology (ABOto) for its collaboration with the ACCME to develop criteria for our profession that will allow the Foundation’s CME education to support our members in their continuing lifelong learning quest. This dovetails with our efforts with the ABOto to provide an opportunity for MOC credit for participating in our clinical data registry, Reg-entSM.

We feel it is critical to include patient and public education as a part of our mission, particularly in the unregulated waters that offer unvetted information about many conditions we treat. This will be particularly important as hearing aids become available over-the-counter in the near future. The Foundation’s new website, designed specifically for patient and public education, will involve a partnership with representatives of the patient community and our subspecialty societies as we strive to become “the trusted source” for patients worldwide with otolaryngologic diseases. When this new site is launched at the Annual Meeting in Atlanta, Georgia, it will feature in-depth information written in a fashion that our culturally diverse patients can understand and use to help make informed decisions about their own healthcare.

We have worked to enhance our products and services through AcademyU[®] for all our members through “Member+” and “Home Study Course+” and by providing all-inclusive access to education activities. Be sure to check out our newly designed and better-than-ever AcademyU.org.

This issue of the *Bulletin* highlights several education offerings. All of us owe a great deal of thanks to the volunteers across our specialty who dedicate a significant amount of time and effort to identifying and creating the premium content that you have come to expect. Your Coordinator for Education, **Richard V. Smith, MD**, leads our education committees that continue to deliver innovative courses and resources ahead of schedule. Our education staff, led by Johnnie White and Tirza Lofgreen, also deserves our gratitude for the exceptional job they do of assembling, formatting, and disseminating the extensive work of the committees, enabling it to reach our learners across the globe. ■



James C. Denneny III, MD
AAO-HNS/F EVP/CEO

“
The creation and
delineation of shared goals
are necessary to traverse
the new training paradigm
that exists today.

”



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Spencer C. Payne, MD



On what strategies would you focus to both identify issues affecting the specialty and advocate for action and member engagement?

The Academy has embarked upon a number of initiatives over the past few years to drive member engagement and to place cultivated information in the hands of the “local” otolaryngologist. We need to remain highly adaptable, and instead of creating broad new strategies, I would rather capitalize on the tremendous resources we already have. ENTConnect has been a fantastic tool for sharing information among colleagues, but as I have utilized it to interact with otolaryngologists around the country, it is clear that it must continue to evolve into a mechanism to provide fast, targeted communications between the members and leadership. I would work to streamline the workflow that would bring issues raised through this forum to the attention of those who can work to fix them. Engagement will follow by implementing a more dynamic system of interaction with our Regional Representatives, BOG members, and our Physician Payment and Policy (3P) Workgroup so that our members can trust that actions will follow.

What initiatives would you recommend for strengthening the relationship and engagement opportunities between AAO-HNS state, local, and specialty BOG societies?

This past year, through the Governance and Society Engagement Committee, we created and implemented a process for member societies to email potential members through the Academy. As this process develops, I would continue to work with societies to provide them with the resources they need. Additionally, I have organized the State Oto Society Roundtable at the AAO-HNS/F Leadership Forum & BOG Spring Meeting the past two years. The goal of this meeting is to provide a truly interactive, face-to-face meeting where we can discuss the solutions to issues that affect all of us, regardless of subspecialty or practice setting. I would advocate that we continue these efforts as we continue to hone the agenda and expand the footprint of this initiative in order to provide the means for leaders from across the country to engage Academy leadership and each other in person, as one specialty, united. ■

Daniel L. Wohl, MD



On what strategies would you focus to both identify issues affecting the specialty and advocate for action and member engagement?

Medicine remains in ongoing transition and our specialty is no exception. While change is necessary to evolve, the uncertainty of any change from the status quo can result in a measure of angst about the future. Being a part of shaping that future is at the core of the BOG mission. Physicians have been shouting loud and clear about how challenging it has become to practice patient-centered, compassionate care within a system that increasingly demands conformity and uniformity. Just as patients do not all neatly fit into one box, neither do physicians all fit into one box.

The BOG, with its three-committee structure and expanding Regional Representative network, is uniquely qualified to reach out, listen, and communicate back to all segments of our diverse Academy membership. In my personal experience, when you feel that your voice is heard, you become more inclined to become engaged with others who listen to and share your concerns. With a united voice, meaningful, actionable progress can be made. As BOG Chair, I would utilize our networking and advocacy strengths to promote the benefits of engaging in BOG initiatives and member activities. The goal would be to further develop a welcoming environment that encourages and enables others to stand up and participate with us.

What initiatives would you recommend for strengthening the relationship and engagement opportunities between AAO-HNS state, local, and specialty BOG societies?

The BOG has made excellent strides in engaging our state, local, and specialty societies, and we will continue to develop and learn from those relationships. We are an incubator of ideas for our Academy, and the more opinions we hear and can analyze, the better positioned our recommendations will become. Our local and state societies have both common and unique perspectives that they have addressed with a wide range of successful programs and initiatives. Each subspecialty society has specific knowledge and expertise worth sharing, and they will be encouraged to listen and respond to general Academy membership questions and concerns. Our Regional Representative program is designed to extend beyond any one election cycle and has already begun ably developing more personal relationships with all our member societies in support of our three BOG Committee initiatives and the respective skill sets they can offer.

As BOG Chair, I would continue to nurture the sustainable growth and development of the Regional Representative grassroots BOG nationwide outreach network. Specifically, as a member of our BOG leadership, I would encourage that we identify and catalog the Academy committee participation of all BOG local, state, and subspecialty society representatives. We would then be able to utilize this database to enhance and further promote interactive membership engagement directly with our BOG proceedings. Cross-pollination of ideas and mutual support throughout our Academy will benefit all of us as we navigate through an uncertain future. ■

The positions of Chair-Elect and Secretary will be elected by the voting members of the BOG (i.e., Governors or Alternate Governors) present at the BOG General Assembly held Saturday, October 6, from 4:30 to 5:30 pm (ET), in Atlanta, Georgia. It is scheduled to take place in room A313-A314, Georgia World Congress Center (GWCC). BOG meeting participants are encouraged to exercise this opportunity, however, no proxy votes are permitted.

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David S. Boisoneau, MD



What initiatives would you focus on and what will your main priorities be during your tenure as BOG member-at-large?

As the BOG Member-at-Large, my main priority would be to continue to coordinate and expand the excellent Regional Representative program. This grassroots network is now out of its infancy, and further growth will be necessary to maximize its value to our members. I have been fortunate to be a part of this program since it began and, as such, I am excited for the opportunity to help shape its future. I have also developed an interest in the opioid crisis and our part as busy surgeons advocating for a paradigm shift in post-op pain management. I believe there is a role for BOG leadership, and the Academy as a whole, in gathering data and educating our members about ways to combat this crisis. Most importantly, I am ready to handle any task the leadership team may ask.

How has your past experience prepared you to take on this new role?

I have spent over a decade advocating for myself and my colleagues, beginning as a member of the award-winning Connecticut State ENT Society, where I have held every position on the Executive Committee. I have remained entirely in a single specialty, non-academic private practice for the past 20 years, developing a full understanding of the pain and pleasure of our specialty on a grassroots level. I practice every aspect of our specialty and see patients from every demographic, which I feel has solidified my ability to interact effectively, especially as the Region 1 Representative. Finally, my ongoing advocacy as a member of the BOG, currently Socioeconomic & Grassroots Committee Vice-Chair, has solidified my desire to continue to work closely with this outstanding leadership. ■

Troy D. Woodward, MD



What initiatives would you focus on and what will your main priorities be during your tenure as BOG member-at-large?

Recently, the AAO-HNS released their new logo and motto, We Are One: Otolaryngology United for Patient Care. This powerful new theme is inclusive and demonstrates that our Academy not only supports diversity but also promotes synergistic partnerships with the specialty societies, international colleagues, and allied health providers. As Member-at-Large, I would help foster that goal by effectively serving as a liaison between Academy members, the BOG, and specialty societies. Active listening and effective communication are key to achieving a unified front for our patients. I would expand previous efforts to present pertinent information from the BOG to specialty societies and their members. Additionally, I would be a sounding board and relay issues that the members have back to the BOG. This would keep the BOG and every specialty society and their members informed, engaged, and united. As Aesop once stated, “United we stand and divided we fall.”

How has your past experience prepared you to take on this new role?

As a liaison between the BOG and the Academy membership, the Member-at-Large has a very important role. This person must be capable of effectively communicating the Academy/BOG programs and initiatives and relay pertinent concerns back to the BOG Executive Committee. Success is dependent upon being approachable, a team player, and a great listener. As President of the Harry Barnes Medical Society, I lead approximately 200 members, chair an annual five-day scientific meeting, and help organize facial plating and mentorship opportunities for interested URM medical students and physicians. Additionally, I remain engaged with the BOG and Academy members by being the Governor for the Diversity Committee and the Vice Chair of the Legislative Affairs Committee. These experiences have allowed me the opportunity to work as a team, advocate for otolaryngologists and our patients, and communicate with and learn from a diverse group of individuals. ■

BOARD OF GOVERNORS

Building resilience with the BOG

Resilience is a skill that can be developed and nurtured

■ **Stacey L. Ishman, MD, MPH**

BOG Immediate Past Chair; Professor of Otolaryngology, Cincinnati Children's Hospital Medical Center



Shawn Achor, happiness researcher and TED Talk presenter, wrote in the *Harvard Business Review* that a majority of American workers are “overly concerned about work, driven by an uncontrollable work motivation, and investing so much time and effort to work that it impairs other important life areas.” In order to combat this, he suggested that we need to focus on building resilience and that “resilience is about how you recharge, not how you endure.”¹ He noted that resilience requires rest, both mental and physical, and that enduring stress and challenges results in burnout and lost productivity.

Other authors have noted that lack of recovery may be as simple as a poor night’s sleep, or nighttime rumination about work, or frequent nighttime awakenings during a busy call night.² And, they note that there is a direct correlation between lack of recovery and an increased incidence of health and safety problems.

A Family Practice residency program created a program to build resilience through interactive conferences.³ These sessions focused on:

- building self-awareness
- coping skills
- time management

- self-care
- strengths and meaning in work
- connections within and outside medicine

One way that I have increased my connections and focused on the meaning of my work is through involvement with the Academy. And

what is the easiest way to get involved with the Academy? Involvement in the Board of Governors (BOG)!

What is the BOG?

The BOG was established in 1982 as the grassroots member network within the Academy. It is made up of constituent societies—local, state, regional, and sister-specialty/national groups from around the United States and Canada—and serves as an avenue of communication between our members and the Board of Directors.

What do I do to get involved?

There are many ways you can get involved.

- **Become an official representative to the BOG.** Every constituent society has three representatives—a governor, a legislative affairs representative, and a socioeconomic and grassroots representative. Please check with your state society if you are interested in serving in one of those roles or check the website at www.entnet.org/content/board-governors to see who is representing you.
- **Apply to a BOG Committee.** We have three standing committees—Legislative Affairs,

Socioeconomic & Grassroots, and Governance & Society Engagement.

- **Become a Region Representative** (<http://www.entnet.org/content/bog-region-map>)
- **Become a State Legislative Tracker** (<http://www.entnet.org/content/state-legislative-advocacy>)
- **Just come to a meeting** or get in touch with us (BOG@entnet.org). We are always looking for people who are interested in helping!

Where and when?

We will be meeting during the AAO-HNSF 2018 Annual Meeting & OTO Experience in **Atlanta, Georgia, Saturday, October 6, from 1:30 - 4:30 pm (ET)**. This meeting always includes ample opportunities to **network with BOG leadership**.

We also hope you will attend our Panel Presentations:

- 1) **Board of Governors Hot Topics: Infection Control 2018; Safety, Sterility and Costs**, Sunday, October 7, 3:45 - 4:45 pm (ET)
- 2) **Developing Professional Expertise: Plan, Publish, and Present**, Monday, October 8, 8:45 - 9:45 am (ET)

I hope to see you there! ■

¹ Achor S, Gielan M. (June 24, 2016). Resilience is about how you recharge, not how you endure. *Harvard Business Review*.

² Wong AV, Olusanya A. Burnout and resilience in anesthesia and intensive care medicine. *BJA Education* 2017 Oct;17(10):2334-2340.

³ Brennan J, McGrady A. Designing and implementing a resiliency program for family medicine residents. *Int J Psychiatry Med*. 2015;50(1):104-114.

BOG Model Society Award winner

The Model Society Award recognizes outstanding local/state/regional societies that exhibit effective leadership. The 2018 Model Society Award is based on activities from February 1, 2017, through January 31, 2018.

The Northwest Academy of Otolaryngology (NWAO) is the 2018 recipient of the Board of Governors (BOG) Model Society Award. The NWAO has a full contingent of members participating in the BOG, including **Sanjay R. Parikh, MD** (BOG Governor), **Sung-Won Kim, MD** (BOG Legislative Representative), and **Nancy R. Juhlin, MD** (BOG Socioeconomic & Grass-roots Representative).

The NWAO is very active in advocating at the state and local level on important issues affecting the profession and patient care. It has

a dedicated member base responsible for monitoring legislative activities at the state capitol and actively lobbying the legislature.

The most recent focus was on Senate Bill 5179, which required coverage for hearing instruments under public employee and Medicaid programs in Washington State. Through the NWAO's efforts, the bill was amended to include otolaryngologists and passed the State House by a comfortable 80-18 vote. The bill was signed by Governor Jay Inslee on March 21, 2018. Dr. Kim was invited to the signing to represent NWAO.

In addition to legislative advocacy, the NWAO plans and runs other member programs, including an annual winter meeting, spring and fall dinner meetings, quarterly email blast updates, maintenance of an up-to-date membership directory, and distribution of a regular member newsletter focusing on timely issues. ■

CORE GRANT UPDATE

An inadvertent error occurred in the production of the July *Bulletin*.

The ARS Resident Research Grant winner names dropped off the listing. This is corrected here and is corrected in the July online version as well.

ARS Resident Research Grant

PRINCIPAL INVESTIGATOR:

Pawina Jiramongkolchai, MD

INSTITUTION:

Washington University School of Medicine, St. Louis, MO

PROJECT:

Efficacy of Mometasone Furoate Nasal Irrigation for Chronic Rhinosinusitis

PRINCIPAL INVESTIGATOR:

Justin Morse, MD

INSTITUTION:

Vanderbilt University Medical Center (VUMC), Nashville, TN

PROJECT:

Inflammatory and Microbial Derivation of CRS Endotypes ■



AMERICAN ACADEMY OF
OTOLARYNGOLOGY-
HEAD AND NECK SURGERY

2018 AAO-HNS election results

The AAO-HNS extends its greatest appreciation to the candidates of the 2018 election for their dedication and willingness to serve. The Nominating Committee presented the membership with an outstanding slate of candidates. The AAO-HNS thanks the Committee for its meaningful deliberations.

We also extend our sincere appreciation to all the candidates for their dedication and willingness to run for office and serve the AAO-HNS and its members.

OFFICIAL RECORD OF THE 2018 AAO-HNS ANNUAL ELECTION RESULTS*

President-Elect

Duane J. Taylor, MD

Director-at-Large (Academic)

Valerie A. Flanary, MD

Director-at-Large (Private Practice)

William R. Blythe, MD

Audit Committee

Selena E. Briggs, MD, MBA, PhD

Nominating Committee (Academic)

Amber U. Luong, MD, PhD

David J. Terris, MD

Nominating Committee (Private Practice)

Lisa C. Perry-Gilkes, MD

Karen A. Rizzo, MD ■

**Terms of those elected will begin October 2018.*

Humanitarian service in Peru

➔ READ MORE ONLINE
Longer article available

In April 2018, the Northeast and Northern California divisions of Healing the Children completed their fifth annual cleft lip and palate mission to Ica, Peru. The team successfully completed 75 operations during the week they were there, including 18 primary cleft lip repairs, 29 cleft palate repairs, and two first-stage microtia repairs. Below left, a young patient following the repair of a unilateral cleft lip. Below right, **Sean Alemi, MD**, a fifth-year otolaryngology resident from the University of California, San Francisco (left) and Joseph Rousso, MD, a facial plastic surgeon from the New York Eye and Ear Infirmary of Mount Sinai (right), perform a first-stage microtia repair using rib cartilage to build the ear construct.



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#OTOMTG18: Bonus Topics of High Relevance

James C. Denny III, MD

We have created opportunities during our upcoming AAO-HNSF 2018 Annual Meeting & OTO Experience in Atlanta, Georgia, for late-breaking updates on topics of critical importance to otolaryngologists and their patients. We will have the most current information available for our attendees delivered via “bonus sessions” throughout the meeting.

Sunday, October 7, 8:30 – 9:30 am (ET)

Reg-entSM: Quality and Outcomes, Your Ticket for Success in New Payment Models

We have been working aggressively over the last two years to create a clinical data registry that will help provide our members from all practice settings the tools they need to participate in successor payment and practice models. Since we debuted Reg-ent to our membership in 2016, our goal was to define and measure quality for our specialty. As we enter Phase II of this project, we have the potential to achieve those goals in the near future with the help of our recently formed partnership that will allow expansion of our capabilities and opportunities. So, consider attending the **Panel Presentation** “Reg-ent: Quality and Outcomes, Your Ticket for Success in New Payment Models.” Immediately following that will be a meeting of our

registry “users group.”

Monday, October 8, 8:45 – 9:45 am (ET)

FDA Perspective on OSA: A Growth Area for Otolaryngology

This spring, our Academy participated in an FDA-sponsored workshop on “Study Design Considerations for Devices Including Digital Health Technologies for Sleep Disordered Breathing in Adults.” As a follow-up to the April workshop, we are pleased to offer the **Panel Presentation** “FDA Perspective on OSA: A Growth Area for Otolaryngology.” This presentation will include a summary of workshop findings, including current status and future opportunities for what, I believe, will be the largest growth area in otolaryngology over the next five years. **Eric A. Mann, MD, PhD**, an otolaryngologist working for the FDA in this area, will be a participant and available to answer questions and share his thoughts, along with respected leaders in the field, as to the direction the treatment of sleep-disordered breathing will take over the next few years.

Monday, October 8, 1:15 – 2:15 pm (ET)

How the CMS Proposed Rule Affects Your Practice and Patients

The Centers for Medicare & Medicaid Services released its proposed rule for 2019 in a 1,500-page document on July 12. There are a number of proposed changes that have the potential to

affect your practices at many levels. We will be presenting the **Panel Presentation** “How the CMS Proposed Rule Affects Your Practice and Patients.” This presentation will include thought leaders from our organization who will answer your questions, and a representative from CMS has been invited to attend. We will also summarize the Academy comments and recommendations to CMS regarding the proposed rule and how we feel it can be improved. Don’t miss this chance to share your opinions with CMS leadership.

Tuesday, October 9, 7:30 – 8:30 am (ET)

How Our Upcoming ENTHealth.org Website Will Benefit You and Your Patients

Finally, you won’t want to miss our presentation “How Our Upcoming ENTHealth.org Website Will Benefit You and Your Patients.” At Sunday’s Welcome Ceremony and at a bonus **Panel Presentation**, we will preview and roll out this new patient information website that will strive to be the “trusted source” for patient education materials in otolaryngology. This will include an enhanced “Find an ENT” feature for current and future patients. The new site demonstration may also be viewed at Academy Central in the Registration Hall and at the Portrait Studio in the OTO Experience. While there, you can also have a professional photo taken



Service and leadership awards



2018 Arnold P. Gold Foundation Award for Humanism in Medicine

The Gold Foundation Humanism in Medicine Award recognizes members committed to practicing otolaryngology with compassionate, patient-centered care.

This year's awardee is **Mark G. Shrime, MD, MPH, PhD**. Dr. Shrime is an Assistant Professor of Otolaryngology and of Global Health and Social Medicine at Harvard Medical School. He also serves as the Research Director at the Program in Global Surgery and Social Change at Harvard Medical School. In addition, he is an otolaryngologist at the Massachusetts Eye and Ear Infirmary and associate faculty at Ariadne Labs.

His academic pursuits focus on surgical delivery in low- and middle-income countries, where he has a specific interest in the intersection of health and impoverishment. To date, he has worked and taught in Liberia, Sierra Leone, Guinea, Benin, Togo, Congo, Haiti, Saudi Arabia, Cameroon, and Madagascar. His work aims to determine optimal policies and platforms for surgical delivery that maximize health benefits while simultaneously minimizing the risk of financial catastrophe faced by patients.

Dr. Shrime received his MD from the University of Texas in 2001, followed by a residency in otolaryngology at the joint Columbia/Cornell program in Manhattan, NY, followed by a fellowship in head and neck surgical oncology at the University of Toronto in 2007. He completed a second fellowship in

microvascular reconstructive surgery, also at the University of Toronto, in 2008.

The Academy commends Dr. Shrime for the compassion, empathy, and sensitivity he demonstrates when caring for his patients. ■



2018 Distinguished Award for Humanitarian Service

The Distinguished Award for Humanitarian Service is awarded 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.

This year's awardee is **Susan R. Cordes, MD**. Dr. Cordes is an otolaryngologist practicing at Adventist Health Ukiah Valley, CA, and is a volunteer professor at Indiana University School of Medicine.

When a faculty member, Dr. Cordes initiated the otolaryngology partnership with Moi University otolaryngologists in Eldoret, Kenya, as part of the Indiana-Kenya Partnership. During the partnership's 10-year history, numerous otolaryngologists, residents, medical students, nurses, and nursing students participated in clinical, educational, and research efforts headed by Dr. Cordes. She is an Honorary Lecturer at Moi University School of Medicine.

She serves as a mentor to students and residents wishing to engage in humanitarian efforts. Dr. Cordes is Past Chair of the AAO-HNSF Humanitarian Efforts Committee and has given lectures and been a panelist

internationally on the topic of humanitarian otolaryngology.

Dr. Cordes has served on the Board of Governors Executive Committee and received a Distinguished Service Award. She is Past Chair of the Women in Otolaryngology Section, and current Chair of the Legislative Affairs Committee of the Board of Governors. She is Past President of the Central Indiana Otolaryngology Society and is a fellow of the Triological Society.

Dr. Cordes completed her undergraduate degree at Indiana University and otolaryngology residency training at its Medical Center. She served as Chief of the Otolaryngology Service at Wishard Memorial Hospital and Residency Program Director for the Indiana University otolaryngology department.

Dr. Cordes fully embodies the qualities associated with this award, and the Academy recognizes her as a tremendous specialty role model. ■



2018 Holt Leadership Award

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.

This year's awardee is **Peter M. Vila, MD**. He is a Chief Resident in Otolaryngology-Head and Neck Surgery at Washington University in St. Louis, MO.

Highly involved with the Academy, Dr. Vila has served on the Section for



presented at Annual Meeting

Residents and Fellows-in-Training, and as its 2016-2017 Chair.

Beginning his involvement as an intern, he created the first resident podcast for the Academy, launched and helped maintain the social media presence for the SRF, and has represented trainees in multiple settings, including clinical practice guideline panels, strategic planning meetings for the Academy, and quality measure development.

Dr. Vila's research interests include clinical epidemiology and quality improvement, and he is particularly interested in quality measure development. He has published more than 20 articles and been the recipient of several awards for his clinical research. He also has been awarded travel grant awards, which attests to his engagement.

Dr. Vila attended the University of Wisconsin for both his undergraduate and master's degrees. He attended the Mount Sinai School of Medicine, NY, for his medical degree and graduated in 2012.

The Academy commends Dr. Vila for his leadership and dedication to the betterment of the specialty. ■



2018 Jerome C. Goldstein, MD Public Service Award

The Jerome C. Goldstein, MD Public Service Award is given annually to recognize an outstanding member for his or her commitment and achievement in service within the United States, either to the public or to other

organizations, when such service promises to improve patient welfare.

This year's awardee is **Norman D. Hogikyan, MD**. Dr. Hogikyan serves as Professor and Associate Chairman of Otolaryngology-Head and Neck Surgery, and Professor of Music at the University of Michigan, Ann Arbor, Michigan. He is a laryngologist and directs the University's Vocal Health Center. Dr. Hogikyan is known as a thoughtful and compassionate physician, dedicated to his patients, students, and the greater community.

Early in his career, through clinical research, he sought to develop a methodology to address a patient's perception and understanding of their voice disorder and how to measure it. Dr. Hogikyan conducted clinical research with and for patients, developing and validating the Voice-Related Quality of Life (V-RQOL) Measure. This patient-centered outcomes instrument is now used widely and translated into many languages.

Committed to community service, in 1996 he founded and has directed an annual head and neck cancer screening clinic. His additional community service activities include: teaching vocal anatomy and the dangers of tobacco use, staffing a free general otolaryngology clinic, ministering urgent care for visiting performing artists, and directing an annual World Voice Day program.

Dr. Hogikyan received the University of Michigan Dean's Award for Community Service in 2012, Resident Mentorship Awards in 2015 and 2017, Otolaryngology Esteemed Clinical Faculty Award in 2015, and Otolaryngology Teacher-of-the-Year award in 2004. In addition to his ongoing work at the University of Michigan, he is currently a 2018-2019 fellow at the University of Chicago MacLean Center for Clinical Medical Ethics. Dr. Hogikyan's focus on improving patient welfare gives form to the ideal for this award. ■



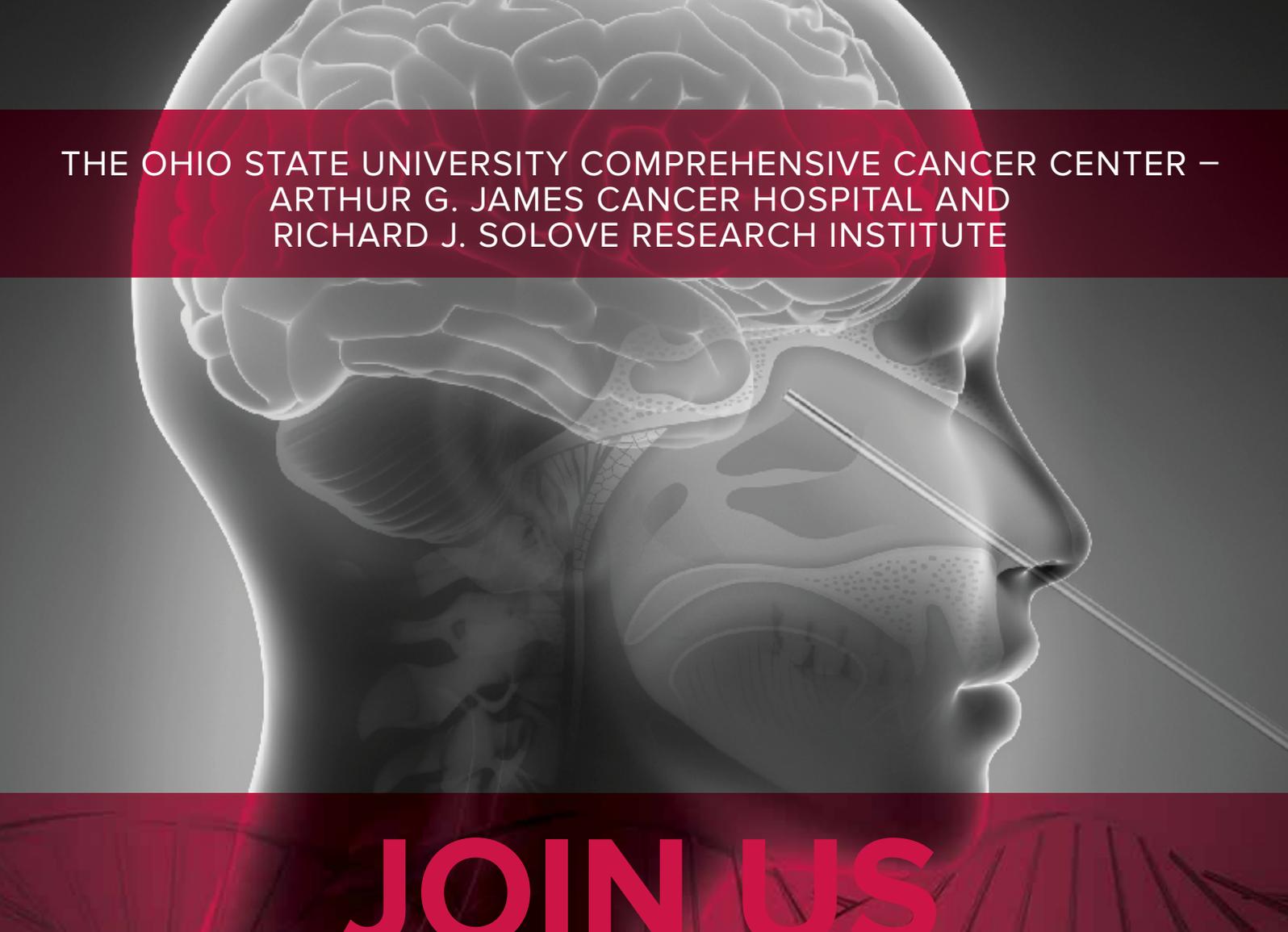
2018 Nikhil J. Bhatt, MD International Humanitarian Award

The International Humanitarian Award honors a non-U.S. otolaryngologist-head and neck surgeon who has selflessly treated persons for whom access to care would have been financially or physically prohibitive.

This year's awardee is **Mohan Kameswaran, MD**. Dr. Kameswaran is the Managing Director and Senior Consultant at the Madras ENT Research Foundation (P) Ltd. in Chennai, India. He is also an Honorary Professor at the SRM Medical College Hospital and Research Centre and an Honorary Senior Lecturer at Edge Hill University in Lancashire, UK.

Dr. Kameswaran is committed to providing healthcare to the underprivileged in his country, particularly children. He is a pioneering cochlear implant surgeon in India and has been proactive in influencing lawmakers to start government-sponsored cochlear implant programs. He has personally conducted more than 200 free camps in remote corners of the country and has mentored more than 40 cochlear implant centers in India, Sri Lanka, Bangladesh, Nepal, and West Africa. He has also pioneered pediatric auditory brain stem implants in India. Dr. Kameswaran was awarded the prestigious Padma Shri Award by the Government of India in 2006 for his exceptional service in the field of medicine.

He earned his medical degree, Diploma of Otorhinolaryngology, and master's degree from the University of Madras in Chennai, India.



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Dr. Kameswaran is dedicated and committed to the proliferation of hearing health throughout India and is respected globally for his work. ■



**2018 Nikhil J. Bhatt, MD
International Public Service Award**

The International Public Service Award honors a non-U.S. otolaryngologist-head and neck

surgeon whose achievements have advanced the specialty.

This year's awardee is **Tania M. Sih, MD**, from São Paulo, Brazil. Dr. Sih is currently a professor at Medical School University of São Paulo. She also serves as the General Secretary of the Interamerican Association of Pediatric Otorhinolaryngology (IAPO) and President of the Nominating Committee for the International Federation of Oto-rhino-laryngological Societies (IFOS).

Dr. Sih is dedicated to the specialty and to improving the lives of the people across South America and Africa. She is a founding member of the IAPO and a chartering member of PENTAFRICA, the Pediatric Ear, Nose, and Throat Association of Africa, where she helped model how to establish a major otolaryngology-focused organization

in an environment with limited resources. Internationally recognized for her contributions to otolaryngology, Dr. Sih has published 35 books in 10 different languages, participated in medical meetings in 50 countries around the world, and served in leadership roles across many organizations and associations.

Dr. Sih earned both her medical degree and PhD from the Medical School University of São Paulo. She completed training in pediatric otolaryngology in Poland; Pittsburgh, PA; and Kyoto, Japan. Additionally, Dr. Sih completed post-doctorate research at the Centers for Disease Control and Prevention in Atlanta, Georgia.

The Academy commends Dr. Sih on her extensive contributions both to the specialty and to those with limited resources and access to medical care. ■



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The history of the Oto-Rhino-Laryngological Society of Japan

■ **Tatsuya Yamasoba, MD, PhD**, Chairman of Department of Otolaryngology, Head and Neck Surgery, University of Tokyo



Hiroshi Moriyama, MD, PhD
Chairman, Board of Directors

Hidegoro Kanasugi, MD, returned to Tokyo from Germany in April 1892, and in May began practicing otology and rhino-laryngology. He initiated lecturing on otology and rhino-laryngology at Tokyo Jikei Hospital Medical School that September. Dr. Kanasugi formed the Tokyo Oto-Rhino-Laryngological Society together with seven other medical professionals on February 19, 1893. This Tokyo Society was the beginning of today's Oto-Rhino-Laryngological Society of Japan. The first general meeting of the Tokyo Society took place on October 28, 1893, with Dr. Kanasugi serving as the President. In November 1894, Dr. Kanasugi founded the Oto-Rhino-Laryngology Research Institute and began publishing the *Oto-Rhino-Laryngology Journal*, which formed the basis for our Society's present journal.

During the general meeting of the Tokyo Society held on January 17, 1897, the group's name was changed to the Dainippon Oto-Rhino-Laryngological Society in anticipation of the organization's future growth. The Society retained this name up through its 47th general meeting held in 1943. On November 10, 1899, the government issued an Imperial Ordinance that an oto-rhino-laryngology course of study be established following the forensic medicine course in the Imperial University Medical College. Accordingly, on January 19, 1900, after study in Germany, Associate Professor Waichiro Okada established an oto-rhino-laryngology course at Tokyo Imperial University.

Dr. Okada was appointed as the first full professor of the University on March 31, 1902. By 1912, the Society had grown into a huge academic body with 826 members.

Once World War II broke out, many members went into active service, and the number of faculty rapidly declined at every university.

As the war situation worsened, medical diagnosis, care, and research activities inevitably stagnated. Regardless, the Society did hold its 47th annual general meeting in Kanazawa in 1943. The Society lost many members, with the number declining from 2,327 in 1944, to 1,906 in 1948.

Following the end of World War II, Japanese medical circles came to be greatly influenced by American medicine. Japanese medical practitioners were exposed to advanced U.S. practices through the medical literature brought by the U.S. military stationed in Japan and were left with no choice but to convert from German to American medicine. Despite the dearth of research facilities and the shortage of personnel, the Society held its 48th annual meeting in Osaka in April 1947, using its new name, the Oto-Rhino-Laryngological Society of Japan. The Society soon regained its vigor and solidified preparations for dramatic future advances in terms of both organizational structure and academic content.

The 8th International Congress of Oto-Rhino-Laryngology was held in Japan in 1965. Not only was this meeting a great success, but the participants also approved a Japanese proposal to establish the International Federation of Oto-Rhino-Laryngological Societies (IFOS), something that foreign countries had tried, but failed, to accomplish for many years. This was a result of the scientific advancement of Japanese

“

As President of the AAO-HNS/F, it is my great honor and privilege to welcome the Oto-Rhino-Laryngological Society of Japan to the AAO-HNSF 2018 Annual Meeting & OTO Experience in Atlanta, Georgia, October 7-10. We look forward to the opportunity for continued friendship, camaraderie, and networking among friends and colleagues at the meeting. In addition, we look forward to our societies working closely together to improve the care and quality outcomes for our patients worldwide through this continued collaboration and outreach as our global message continues to resonate around the world.

— **Gavin Setzen, MD**
AAO-HNS/F President

”

oto-rhino-laryngology through our Society and the unified efforts of its members. The initial IFOS Secretariat was located in Tokyo, with Jo Ono, MD, as the General Secretary, and IFOS has subsequently played a leading role in oto-rhino-laryngology international exchange activities. The IFOS Secretariat remained in Tokyo for 12 years and was relocated to Mexico in 1975. The history of this seminal period of the IFOS was compiled by Dr. Ono, published as “Record of the First Twelve Years of IFOS” in April 1981, and distributed overseas.

Japanese oto-rhino-laryngology has continued to advance. Starting with the founding of the Japan Broncho-Esophagological Society in 1949, our Society came to have a total of nine different related academic and research societies. The vibrant activities of the Society's members in each field were evidenced, as numerous devices were developed, including nebulizers and hearing aids in 1948, audiometers in 1949, surgical microscopes in 1957, electronystagmographs in 1959, and microscopic laryngeal surgery implements and fiberscopes in 1966. These and subsequent developments, such as the use of laser equipment, remarkably boosted the quality of diagnosis technologies and treatment contents, and led to countless research findings in each field.

Since the Oto-Rhino-Laryngological Society of Japan celebrated its 100th anniversary in



1993, medicine has witnessed remarkable developments along with advances in cutting-edge technologies. The advance of our discipline has inevitably been accompanied by finer specialization into smaller fields. This is evidenced by the approximately 25 groups that have spun off from our Society since 1949. Sixteen of these are still recognized by our Society as related societies.

The Oto-Rhino-Laryngological Society of Japan instituted a system for the certification of specialists in 1984. Our members work to improve the quality of their practice through a continuing education program. Our membership is also steadily growing, rising from 7,147 in March 1983, to 10,969 in June 2018.

To celebrate our 125th anniversary, our Society held an annual meeting at Yokohama May 30 - June 2, 2018, with Professor Tatsuya Yamasoba as the President. ■

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Longer article available



Ceremony to celebrate the 125th anniversary of the Oto-Rhino-Laryngological Society of Japan



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T. S. E. Stangorup M.D., J. Soderberg-Olsen M.D., V. Balle M.D. Autoinflation in treatment of Secretory Otitis Media. Arch Otolaryngol Head Surg. 1992; 118: 149-152.



Host your Alumni Reception at the AAO-HNSF 2018 Annual Meeting & OTO Experience

The AAO-HNSF 2018 Annual Meeting & OTO Experience is the perfect place to reconnect with colleagues from your alma mater.

This year's reception will take place Tuesday, October 9, from 6:30 to 8:00 pm (ET) in the Omni CNN Atrium. Don't miss the chance to provide networks across your alumni institutions in this unique venue featuring a 15-story glass-enclosed atrium with sweeping views of the world-famous CNN Center.

This year's event will feature:

- Co-branded selfie frames with your institution name and Annual Meeting graphics and hashtag

- Photo prop station including hats, wigs, selfie sticks, and more
- Professional photographer
- Centrally located bar
- 10 drink tickets included per reception zone

Make sure your institution is represented at the AAO-HNSF 2018 Annual Meeting & OTO Experience Alumni Reception by reserving your spot today. Visit www.entannualmeeting.org/request-meeting-space/ to learn more or to complete your application.

If you have additional questions, please contact Irma Chavez at 703-535-3786 or by email at ichavez@entnet.org.



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Five reasons to visit the new AcademyU®

Lifelong learning is at the core of the Academy's mission. We are committed to providing our members the knowledge, education, clinical tools, and professional support to help you meet the challenges of your otolaryngology practice and build mastery throughout your career.

This summer, the Foundation updated **AcademyU.org**, the technology platform used to deliver online otolaryngology education. We've made it easier to search, complete, track, and claim credit for your education activities.

Learning happens at **AcademyU.org**. Stay up-to-date on the latest in otolaryngology education and improve your practice.

RESPONSIVE DESIGN

The new website features a fully responsive web design, which allows seamless access across all platforms from an oversized desktop computer monitor, a laptop, or a small-screen device such as a smartphone or tablet. Our learners asked for the ability to access education "on the go," and we responded with this important technology update.

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Once you have logged in with your Academy ID and password, a list with your most recently accessed or purchased courses appears in a simple, clean "My Courses" box located at the top. You will not need to complete a course for it to be easily accessible. For example, start a new course at the office, go home, and then return to the website at a later time to complete it. It will be there waiting for you.

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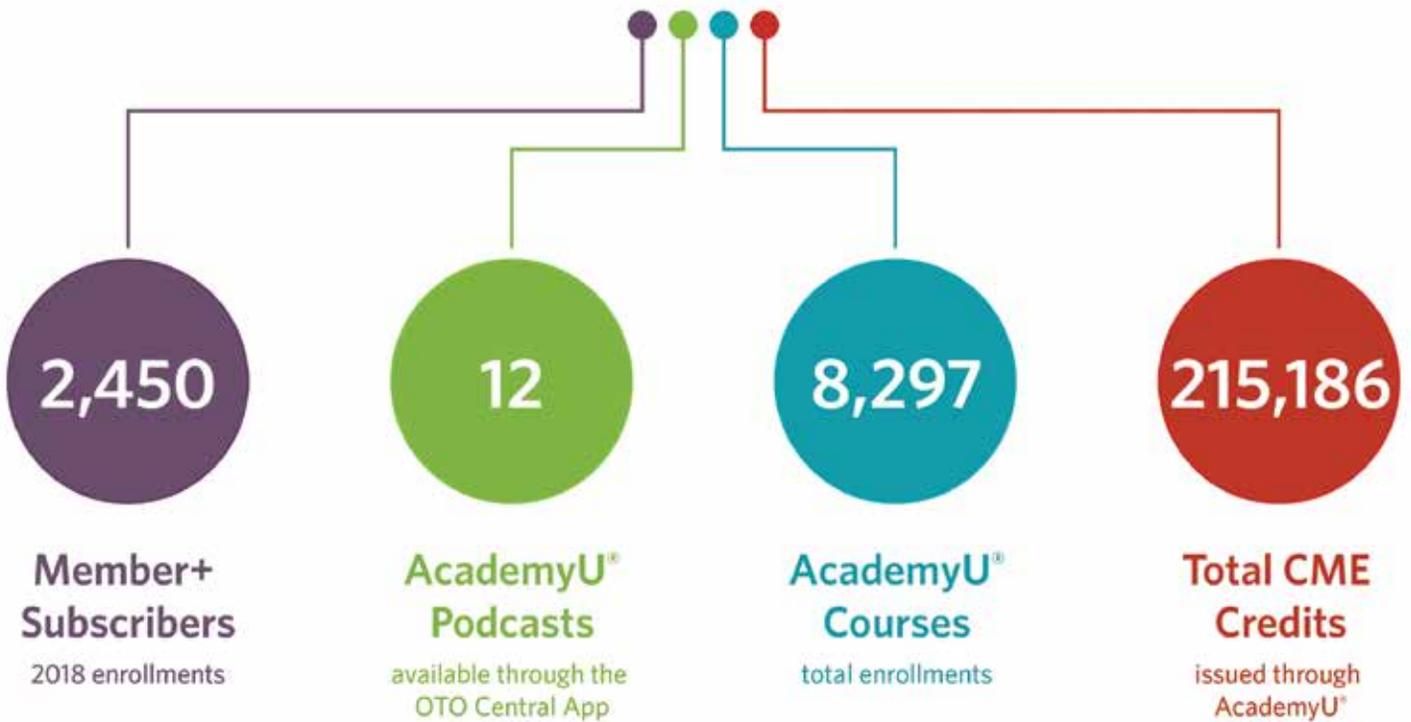
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New home page enhancements include quick links to the OTOcasts Academy podcasts, OTOSource comprehensive curriculum, resident education and resources, and recently released CME courses—including the popular Patient Management Perspective (PMP) case-based series.





2018 Annual Meeting webcasts on AcademyU®

Full conference registrants of the AAO-HNSF 2018 Annual Meeting & OTO Experience will receive unlimited online access to all recorded education sessions through AcademyU. Watch your favorite session again or explore a new topic. You can also obtain up to 30 more CME credits by viewing the CME Annual Meeting webcasts and completing the posttest and evaluation. The sessions will be available 24 hours after they take place in Atlanta, Georgia. ■



Q & A

OTOSource and COCLIA: Exciting updates for otolaryngology education

Richard V. Smith, MD, AAO-HNSF Coordinator for Education, spoke with **Sonya Malekzadeh, MD**, OTOSource Task Force Chair, and project lead for the newly updated COCLIA, about the Academy's newest updates for otolaryngology education.



Richard V. Smith, MD



Sonya Malekzadeh, MD

Q **Richard V. Smith, MD:** Let's start with the new resource, OTOSource. Can you tell us a little bit about what it is and what led to it?

A **Sonya Malekzadeh, MD:** OTOSource is a single-source online repository for otolaryngology education developed by the AAO-HNSF and the otolaryngology specialty societies. Previous versions of an

otolaryngology curriculum were developed by the Foundation in 1986 and 2002. But with the growth and evolution in our specialty over the last 15-plus years, another update was required. This updated curriculum reflects the new requirements of the Accreditation Council for Graduate Medical Education, Accreditation Council for Continuing Medical Education, and American Board of Otolaryngology, along with the evolving practice of otolaryngology-head and neck surgery.

Q **Dr. Smith:** What was the development process for OTOSource?

A **Dr. Malekzadeh:** OTOSource was developed by the Comprehensive Curriculum Task Force and Work Group, comprised of representatives from all otolaryngology subspecialty societies. The enormous amount of collaboration, dedication, and leadership among the Foundation, authors, Task Force and Work Group, and the subspecialty societies is a huge credit to our specialty. This curriculum would not be possible without the contributions of many experts in the field.

Q **Dr. Smith:** Who is OTOSource designed for?

A **Dr. Malekzadeh:** Because of the comprehensive nature of the site, OTOSource is an excellent tool for anyone working in or around otolaryngology. It can provide practicing physicians, residents, medical students, and non-physician clinicians with teaching tools to assist with board certification, recertification, and lifelong learning.

Q **Dr. Smith:** Talk a little bit about the site itself. The content is broken up into 11 units. What are in these units?

A **Dr. Malekzadeh:** The 11 units represent each of the subspecialties of otolaryngology and some other common areas. Units are further divided into modules, with each module containing topics that present vital concepts, broken down into learning objectives, references, and review questions. At the end of each module, external activity links are provided to direct learners to education courses relevant to the module. In addition, there is a "surgical videos" section of the website that contains open source otolaryngology surgical videos.

Q **Dr. Smith: Is there a fee to access OTOSource?**

A **Dr. Malekzadeh:** Access to the OTO-Source modules and surgical videos is completely free; however, the linked content to external sources through the otolaryngology specialty societies and to AcademyU® (e.g., journal articles, education activities, resources, videos, etc.) may have costs associated with them.

Q **Dr. Smith: OTOSource can be accessed at www.otosource.org. Is what we see there now the final otolaryngology curriculum?**

A **Dr. Malekzadeh:** No. While many modules are complete and available for use, other modules remain under development. When they become available, they will be added to the website. We will also continue to monitor the topics to find knowledge gaps and fill them using our Comprehensive Curriculum Work Group experts. Finally, as new education activities are created, we will link them to the corresponding modules. OTOSource will serve as a living curriculum, constantly edited and updated, in continued collaboration with the specialty societies.

Q **Dr. Smith: Let's move on to COCLIA. What can you tell me about the project?**

A **Dr. Malekzadeh:** I developed the Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) nearly 20 years ago in response to the need for a resident teaching tool. COCLIA is an interactive program that helps residents gain otolaryngology-head and neck surgery knowledge in a systematic approach using adult-learning principles. COCLIA provides

a broad range of discussion questions for every learner level and covers over 100 major otolaryngology topics. With the help of **Christine E. DeMason, MD**, the scope was expanded to include new questions, updated references, and greater clinical depth and enhanced learning with images.

Q **Dr. Smith: As a residency program director, how do you implement COCLIA with your residents?**

A **Dr. Malekzadeh:** We use COCLIA as an education tool to facilitate learning. Residents are responsible for researching answers to assigned questions and sharing the information with their colleagues. Learning can and should be fun! I encourage them to make it enjoyable, meet over coffee, and do it in a relaxed setting whenever possible. Residents are instructed to save the weekly conference handouts. By the end of the two-year program, residents will have a binder (online or print) equipped with pertinent information and discussion notes on the major topics in otolaryngology.

Q **Dr. Smith: Where can residency training program directors and residents go to access COCLIA? Is there a cost?**

A **Dr. Malekzadeh:** COCLIA can be accessed for free at www.coclia.org. One of the best things about the new update is the accessibility. You can view the topics and questions conveniently online on your computer or mobile devices. There is also an option to download the questions, and it can be used by groups through online cloud sharing tools. ■

We thank the following contributing organizations for their collaboration on OTOSource:

American Academy of Otolaryngology-Head and Neck Surgery Foundation (AAO-HNSF)

American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS)

American Academy of Otolaryngic Allergy (AAOA)

American Board of Otolaryngology (ABOto)

American Broncho-Esophagological Association (ABEA)

American Head & Neck Society (AHNS)

American Laryngological Association (ALA)

American Neurotology Society (ANS)

American Otological Society (AOS)

American Rhinologic Society (ARS)

American Society of Geriatric Otolaryngology (ASGO)

American Society of Pediatric Otolaryngology (ASPO)

Association of Academic Departments of Otolaryngology (AADO)

Otolaryngology Program Directors Organization (OPDO)

Society of University Otolaryngologists (SUO)



The past, present, and future of AcademyU®

Richard V. Smith, MD, AAO-HNSF Coordinator for Education

The launch of AcademyU in 2015 was a highlight of AAO-HNSF's commitment to elevating otolaryngology education. It represented the Foundation's bold step into the world of online learning, with various learning formats and a catalog of more than 200 CME courses available to learners 24 hours a day, 365 days a year. It also provided Academy education committee members a platform upon which to build education resources based on practice gaps to enhance knowledge, competence, and skills in the practice of otolaryngology-head and neck surgery.

In 2018, the Foundation has made several positive enhancements to AcademyU. Here are a few of the new features we are particularly proud of, all created based on member feedback:

- **Member+ campaign:** We launched an exclusive AcademyU subscription program for members and fellows that debuted to great popularity. This program provides members access to over 200 CME courses

in AcademyU for the price of one. The fee of \$50, paid annually in addition to membership dues, is still available for members who want to take advantage of it. This subscription program will also be offered again next year.

- **Enhanced resident member Home Study Course+ (HSC+) program:**

In addition to the Home Study Course four-section compendium of select scientific journal articles and access to more than 200 education activities in AcademyU, HSC+ now includes access to the AAO-HNSF 2017 Annual Meeting & OTO Experience webcasts containing a library of nearly 400 sessions, plus the AcademyQ-2018 Set (mobile app) with 400 new otolaryngology questions to test recall, interpretation, and problem-solving skills.

- **Annual Meeting webcasts.** Beginning with last year's AAO-HNSF 2017 Annual Meeting & OTO Experience in Chicago, IL, full-conference attendees now get free access to the nearly 400 sessions captured as part of their registration fee. Access to this timely content is for three years from the date of the meeting. It also includes 30

bonus CME sessions, where credit can be earned after the conference is over by completing the course, posttest, and evaluation. By capturing

this wealth of content since 2016, we have been able to increase the number of courses available in AcademyU from 200 to more than 1,200 and growing.

- **Increasingly mobile-friendly courses.**

Our members want learning "on the go," and AcademyU now provides that in several of our CME activities. Case-based courses, webcasts, eCourses, and the AcademyQ (mobile app, otolaryngology question bank) can all be conveniently accessed on any mobile device.

The new additions to AcademyU go beyond the website enhancements. In the last year, our nine education committees have created more than 40 new eCourses, released the AcademyQ-2018 Set with 400 questions, and recorded 13 podcasts. The *Quick Reference Guide to TNM Staging of Head and Neck Cancer and Neck Dissection, 5th Edition* was updated



through collaboration with the American Head & Neck Society. In addition, collaboration between the AAO-HNSF Otolaryngology and Neurotology Education Committee and the American Neurotology Society produced a special four-part surgical video eCourse on *Expanding Knowledge and Improving Competence in Tympanoplasty Surgery: Expert Tips and Techniques*. In coordination with the Pan-American Committee and with the help of residents in Latin America, three Patient Management Perspectives (PMP) courses were translated into Spanish and are now available in AcademyU. In addition, 16 new courses related to clinical practice guidelines illustrate the commitment to aligning our education with the excellent work being done by the Guideline Task Force.

Outside of AcademyU, the Foundation continues to focus on simulation. Simulation-related activities at the AAO-HNSF 2018 Annual Meeting & OTO Experience in Atlanta, Georgia, will include:

- Simulation Experience Pre-Conference Workshop.** This workshop will provide a hands-on simulation experience using the latest devices in otolaryngology. It will take place on Saturday, October 6, at the Emory University Center for Experiential Learning (ExCEL).
- SIM Tank.** Come see the top three most innovative simulation project authors present to a panel of expert judges while competing for the top prize at SIM Tank. In its second year, this event is a popular draw for those interested in current simulator and simulation activities. These exemplary

projects were selected from the 2018 Call for Simulation Proposals.

- Simulation Reception & Showcase.**

This is an impressive display of nearly 30 innovative and novel otolaryngology simulators or simulation projects. Table-top simulator demonstrations and PowerPoint presentations will be on display, highlighting individual and team accomplishments. The top three SIM Tank finalists will be recognized and honored for their exemplary projects.

Coming next year

Innovation is one of the keys of education, and we are working on several projects we hope to debut in the next year. A new and expanded “ENT ImageViewer” website with more than 700 images that were generously donated by **Eiji Yanagisawa, MD**, will be ready to research and download. Several new **Practice Management podcasts** will keep members up-to-date on timely business of medicine topics required for their practice to succeed. Research from the **SimTube study** will assist residency programs to prepare residents to become skilled, early-career surgeons. We are also developing a **database of important temporal bone anomaly CTs**, which will be used to develop a national curriculum for 3-D printed temporal bone dissection. There are many other projects in the pipeline as well.

Please feel free to reach out to me through ENTConnect with suggestions, comments, or ideas.

AcademyU.org is, and will continue to be, your education source to meet the needs of all otolaryngologists. ■

AAO-HNSF Education Committees

Education Steering Committee
Richard V. Smith, MD, Chair

Facial Plastic and Reconstructive Surgery Education Committee
Scott B. Roofe, MD, Chair

General Otolaryngology Education Committee
Stacey L. Ishman, MD, MPH, Chair

Head and Neck Surgery Education Committee
David M. Cognetti, MD, Chair

Laryngology and Bronchoesophagology Education Committee
Thomas L. Carroll, MD, Chair

Otology and Neurotology Education Committee
Marc L. Bennett, MD, Chair

Pediatric Otolaryngology Education Committee
Jeffrey P. Simons, MD, Chair

Practice Management Education Committee
Brendan C. Stack, Jr., MD, Chair

Rhinology and Allergy Education Committee
Stacey T. Gray, MD, Chair

Simulation Education Committee
Ellen S. Deutsch, MD, Chair

CALL FOR APPLICANTS

Board Coordinator for Education

The AAO-HNS Foundation Board of Directors is seeking applicants to serve as Board Coordinator for Education.

If elected by the Board, the Coordinator will serve a single four (4)-year term of office, from October 1, 2019, through September 30, 2023. The Coordinator for Education-Elect will shadow the incumbent Coordinator for Education from

October 1, 2018, to September 30, 2019.

The Coordinator may be re-elected to a second term only after the passage of at least four years from the end of their term.

Coordinators receive a stipend.

Specific duties of the Coordinator include leading the development and execution of AAO-HNS/F education strategy in support of the AAO-HNS/F mission.

The ideal candidate will possess an innovative and thoughtful perspective on the education needs of members and be able to use that perspective to design dynamic, engaging, and valuable education experiences for all audiences.

Interested applicants are invited to submit a letter summarizing their qualifications, a curriculum vitae, and letters of recommendation to bmaj@entnet.org no later than midnight (ET), Monday, August 20.

For the full description of the position, visit www.entnet.org/content/call-applicants. ■

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ARS 64th ANNUAL MEETING

October 5-6, 2018
Westin Peachtree Plaza Hotel
Atlanta, GA

MEETING HIGHLIGHTS:



**The 14th Annual Kennedy Lecture:
Guest Speaker: Noam Cohen, MD, FARS**

Associate Professor of Otorhinolaryngology – Head and Neck Surgery and Director of Rhinology Research at The Perelman School of Medicine at The University of Pennsylvania; Adjunct Associate Member of The Monell Chemical Senses Center and a Staff Surgeon at the Philadelphia VA Medical Center

**Topic: "Pathophysiology of Refractory CRS:
Translating Basic Science into Clinical Outcomes"**

- **Film FESstival**
A contest for the most interesting video case of sinus or skull base surgery
- **Women in Rhinology, Mentorship Program and Resident's & Fellows Combined Educational Session**
- **Resident's Cadaveric Lab** (*Limited Space*)
- **Poster Hall**
- **Exhibit Hall**
- **Welcome, Poster and DWK Lecturer Cocktail Reception**
- **Guest Countries: Colombia, Japan, Portugal, South Africa, Turkey**

HOUSING: <https://www.wynjade.com/aaohnsf18/ars>
(Rooms are filling up quickly)

REGISTRATION: http://www.american-rhinologic.org/annual_registration

Details at http://www.american-rhinologic.org/annual_meeting

Contact: Wendi Perez, Executive Administrator, ARS, PO Box 269, Oak Ridge, NJ 07438 | Tel: 973-545-2735 | Fax: 973-545-2736 | wendi@amrhnso.com

www.american-rhinologic.org



Stanford Otolaryngology Update November 8-10, 2018 Stanford, CA



Increase your knowledge surrounding effective diagnosis and management of common, clinically relevant otologic disorders

Course Directors:

Nikolas Blevins, MD
Robert K. Jackler, MD
Peter Santa Maria, MD, PhD
Matthew Fitzgerald, PhD

Special Guest Faculty:

Moises A. Arriaga, MD, MBA, FACS
Gerard O'Donoghue, MBChB, FRCSI, FRCS, MCh

Learn more and register at: cme.stanford.edu/otology

Presented by the Department of Otolaryngology – Head & Neck Surgery at the Stanford University, School of Medicine



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

Presents

Temporal Bone and Microanatomy Hands-on Dissection Workshop

October 19 & 20, 2018

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

Registration fee: \$475

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 bernice.sulkowski@ahn.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.ahcme.org. Select Conference Schedule on the left, then scroll until you find the appropriate Temporal Bone Course.

Allegheny Health Network



Atlanta, GA, USA

Department of Otolaryngology – Head and Neck Surgery

Course Director:
Esther X. Vivas, MD

Course Faculty:

Esther X. Vivas, MD	C. Arturo Solares, MD
Kavita Dedhia, MD	Douglas E. Mattox, MD
Malcolm D. Graham, MD	N. Wendell Todd, MD, MPH

Temporal Bone Surgical Dissection Courses

5 Day Courses

October 1-5, 2018

March 25-29, 2019

October 28-Nov 1, 2019

Fee: \$1800 Physicians in Practice
\$1500 Residents (with letter from chief)
CME: 45 Category 1 Credits

For more information, please visit our website at:
www.otolaryngology.emory.edu
or you may email us at:
emoryotolaryngology@emory.edu



School of Medicine

UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS

Academic Community Practice Opportunity Denver, CO

The Department of Otolaryngology is seeking a BC/BE otolaryngologist to join the full time faculty in July 2019. Responsibilities include primarily clinical service, with some teaching and/or research. The primary location is the new University of Colorado Health Highlands Ranch Hospital.

This is an exciting opportunity to join a growing and successful department in developing a new site of practice while expanding services into the greater Denver community.

Full job posting: www.jobsatcu.com Job No. 14121

Search Committee Chair:
Todd Kingdom, MD
Vice Chair of Clinical Affairs & Quality

Please send a letter of interest and CV to:
Steve Osswald – steve.osswald@ucdenver.edu



Bassett Healthcare Network
Bassett Medical Center

Otolaryngologist
Join A Great Team!

Bassett Healthcare Network, a progressive health care network in central New York and major teaching affiliate of Columbia University, is seeking an Otolaryngologists to join our staff.

Pertinent Highlights Include:

- **3 Otolaryngologist and 4 Advanced Practice Clinicians (APC)**
- **180 Bed Primary Hospital with Level II Trauma Center**
- **Instant Referral Base provided by over 300 Primary Care Clinicians**
- **Full support staff with dedicated clinic space**
- **Otolaryngology Services include otology, laryngology, facial plastic surgery, sinus surgery, head and neck surgery**

Bassett Healthcare Network is an integrated health care system that provides care and services to people living in an eight county region covering 5,600 square miles in Central New York. The organization includes six corporately affiliated hospitals, as well as skilled nursing facilities, community and school-based health centers, and health partners in related fields.

Enjoy an outstanding quality of life in this lakeside resort town located south of the Adirondack Mountains and north of the Catskills. The combination of a modern practice within a growing academic and research oriented healthcare system, coupled with excellent schools and multiple outdoor recreational, cultural and artistic activities, makes this a unique opportunity.

For confidential consideration, please contact:

Debra Ferrari, Medical Staff Recruitment
 Phone: 607-547-6982; email: debra.ferrari@bassett.org or visit our web-site at www.experiencebassett.org

Bassett Medical Center provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, creed, sex (including pregnancy, childbirth, or related condition), age, national origin or ancestry, citizenship, disability, marital status, sexual orientation, gender identity or expression (including transgender status), genetic predisposition or carrier status, military or veteran status, familial status, status a victim of domestic violence, or any other status protected by law.



**HEAD & NECK
 SURGEONS**

Private Practice Opportunity - General Otolaryngologist

Arizona Otolaryngology Consultants is one of the largest single specialty, physician-owned practices in the Valley, providing high quality medical care since 1997. Our group consists of multiple subspecialties, emphasizing all aspects of Otolaryngology/Head & Neck Surgery, including head & neck oncology, pediatric otolaryngology, laryngology, neurotology, hearing aid sales and CAT scanning. We offer patients ease of access at any of our 5 office locations and many surgery options as a result of over a dozen surgical affiliations.

Due to continued growth, we are looking to add a BC/BE General Otolaryngologist to our team of providers who offer a unique and collaborative approach to patient care.

Employment opportunities with AOC include:

- Excellent salary with partnership track
- Competitive health benefits
- Paid time off
- Malpractice insurance
- CME reimbursement

Interested candidates please submit your current CV and letter of interest to:

Alison Scott, Practice Administrator – Alisons@aocphysicians.com

For more information about our practice, please visit www.AOCPhysicians.com



Full time Specialty and Sub-Specialty Positions Available
At the Preeminent Otolaryngology Partnership in the Nation

Here's your opportunity to become a member of ENT and Allergy Associates, LLP (ENTA) and serve patients in state-of-the-art clinical offices in the **Hudson Valley, Long Island and New Jersey**.

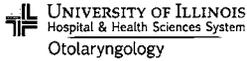
We have current openings in White Plains, New Rochelle, Wayne, Somerset, Hauppauge, Port Jefferson, Southampton, Patchogue and Middletown

We offer new associates:

- The collegial expertise and guidance of nationally and internationally recognized specialists and subspecialists
- The prestige of an academic institution, without the bureaucracy
- Clinical faculty appointments at renowned tertiary centers including Mount Sinai, Northwell and Montefiore
- A starting salary of \$300,000
- A well-traveled road to partnership without buy-ins and buy-outs
- A governance structure that gives you a voice from Day 1, and colleagues who understand there is more to life than just practicing medicine

Our continued growth, coupled with upcoming physician retirements, means opportunity for you!

For more information, contact our President, **Robert Green, MD** (Rgreen@entandallergy.com) or our Chief Executive Officer, **Robert Glazer** (Rglazer@entandallergy.com or call 914-490-8880).



The Department of Otolaryngology-Head & Neck Surgery of the University of Illinois at Chicago and the University of Illinois Hospital and Health Sciences System is seeking applicants specializing in Sinus, Rhinology and Skull Base Surgery.

OTOLARYNGOLOGIST-SKULLBASE-RHINOLOGY SURGEON

This is a full-time faculty position with Assistant or Associate Professor rank and tenure to be determined commensurate with experience and interest. We are seeking faculty to join our dynamic and growing clinical academic practice as part of a team-centered approach to patient care. As part of the largest medical school in the US, those interested in pursuing clinical or translational research will find a supportive infrastructure and diverse patient population.

Duties and interest to include providing direct patient care, supervising residents and medical students, and pursuing clinical or translational research. Applicants consideration, application must be received by Oct. 15, 2018. Applications will be reviewed on a rolling basis. Interested applicants should send their curriculum vitae to:

Barry Wenig, MD, MPH, FACS
Francis L. Lederer Professor and Head
 Department of Otolaryngology-Head & Neck Surgery (M/C 648)
 University of Illinois at Chicago
 1855 West Taylor Street, Room 2.42
 Chicago, IL 60612
 Phone: (312) 996-6582, Fax: (312) 996-1282
 Email: ENTNR@uic.edu
 www.otol.uic.edu

The University of Illinois at Chicago is a major clinical and research university offering the cultural, business and entertainment opportunities you can only find in a world-class city. For more information, please visit www.uic.edu or <http://research.uic.edu>

The University of Illinois at Chicago is an affirmative action, equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, protected veteran status or status as an individual with a disability.

The University of Illinois conducts background checks on all job candidates upon acceptance of contingent offer of employment. Background checks will be performed in compliance with the Fair Credit Reporting Act.



**Harvard Department of Otolaryngology/Massachusetts Eye and Ear
 Regional and Specialty Growth Opportunities over the next 1-3 Years**

- General Otolaryngology • Laryngology • Neurotology
- Pediatric Otolaryngologist

We are expanding to New Hampshire, northern Massachusetts, and Rhode Island and have immediate and longer term openings. Positions are available on our main campus at 243 Charles Street in Boston and our many Boston suburban locations.

The Department of Otolaryngology at Massachusetts Eye and Ear seeks qualified candidates for full-time general otolaryngology positions, as well as two pediatric otolaryngologists, an academic laryngologist with an interest in dysphagia, and a neurotologist with a focus on vestibular disorders. We have available full-time clinician opportunities as well as academic and leadership positions, including regional network director positions.

As a full-time member of the Mass. Eye and Ear staff, there are opportunities to participate in basic and clinical research and/or teaching within Mass. Eye and Ear and Harvard Medical School with academic rank commensurate with experience. The successful candidate must be Board certified or Board eligible in Otolaryngology.

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability status, protected veteran status, or any other characteristic protected by law.

Please send a letter of interest and curriculum vitae to:

D. Bradley Welling, MD, PhD, FACS
 Professor and Chair, Department of Otolaryngology
brad_welling@meei.harvard.edu



BC/BE Otolaryngologist to join busy practice in Western New England

Our robust practice with a well-established patient base is searching for a strong generalist or a Pediatric subspecialist. The largest ENT group in the region, Ear, Nose & Throat Surgeons of Western New England is a private practice with 7 physicians and 4 advanced practice providers, three office locations, and an associated surgery center. We are the primary ENT service for two community hospitals and for the region's only Level 1 Trauma and major academic center. We have served the community for more than 51 years with advanced endoscopic sinus surgery, head and neck cancer, laryngology, endocrine surgery, otology/neurotology, pediatric otolaryngology, and allergy testing and treatment.

- Compensation comprised of salary plus productivity bonus
- Anticipated starting volume of 30 patients per day
- Low practice call: 1:6, consisting of two weekends every 3 months
- State of the art offices with video stroboscopy, CT scans, VNG testing, ABR testing, and on-demand audiology
- Excellent earning potential with opportunity for partnership available

With offices in Springfield, Northampton and Ware, Massachusetts, the practice offers a community lifestyle in western Massachusetts with the benefits of easy access to Boston (1 1/2 hours), New York City (2 1/2 hours) and Vermont skiing (1 hour). As a family-friendly area, it is a well-recognized center of art, theater, music and quality restaurants. Excellent educational opportunities make this area perfect in every way. Please contact Barry Jacobs, MD FACS at brjacobs@entsurgeons.us or Jerry Schreiberstein, MD FACS at jschreiberstein@entsurgeons.us for additional information or to forward your CV.



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

The Department of Otolaryngology at UTMB Health in Galveston, Texas is actively recruiting enthusiastic candidates for three full-time positions.

Pediatric Otolaryngologist

FULL-TIME BE/BC FELLOWSHIP TRAINED FACULTY

Otologist/Neurotologist

FULL-TIME BE/BC FELLOWSHIP TRAINED FACULTY

**Head and Neck Surgical Oncologist/
Microvascular Reconstructive Surgeon**

FULL-TIME BE/BC FELLOWSHIP TRAINED FACULTY

These positions entail opportunities to participate in all aspects of clinical practice, as well as resident and medical student education. Candidates interested in pursuing clinical research are of particular interest.

In response to the rapid growth in our communities, the department has grown to now include 15 practitioners delivering care through all subspecialty areas of otolaryngology, a division of audiology, and a division of speech language pathology.

Organizationally, UTMB Health has similarly grown 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.

Please direct your Letter of Interest and CV to:

Vicente Resto, MD, PhD, FACS
 Physician Executive for Growth
 Assoc. Chief Physician Executive for Faculty Group Practice
 Chair, Department of Otolaryngology UTMB Health
 301 University Boulevard, Galveston, TX 77555-0521

Email: varesto@utmb.edu
Phone: 409-772-2701



Capital Region Otolaryngology Head and Neck Group, LLP

Otolaryngologist Albany, New York

Capital Region Otolaryngology Head and Neck Group, LLP, an independent, physician owned private practice, has an excellent opportunity for a Board Certified/ Board Eligible Otolaryngologist to join the team. Otolaryngologists at this busy multi-location practice specialize in all disorders affecting the ears, nose, throat, head and neck. The practice has been providing the finest of treatment in the New York Capital District area for more than 50 years with a team of 6 experienced physicians, 7 full-time and part-time audiologists and a physician assistant. Our Comprehensive Compensation package includes:

- Competitive salary
- Negotiable advancement time to Partnership
- Performance based quarterly productivity bonus for partners
- Generous paid time off
- Excellent health care insurance plans
- Reimbursement for 5 days of CME per year
- 1:5 Shared Call Schedule
- Well established primary care referral base

Life in Upstate New York

The Capital District area of New York State includes the cities of Albany, Saratoga, Schenectady and Troy, plus many suburbs. With some of the finest options for higher education, culture and recreational activities, the Capital Region makes our communities attractive to live in, work in, and learn in. Our physicians are credentialed and privileged at the top notch health care hospital facilities in the area, Albany Medical Center, St. Peter's Hospital and Partners, and Saratoga Hospital.

For confidential consideration, please send your CV to:

Angela N. Motler
Practice Administrator
amotler@capitaloto.com
518-482-9111



MedStar Washington Hospital Center

The Department of Otolaryngology-Head and Neck surgery at MedStar Washington Hospital Center is seeking a BC/BE physician for a full time position. The candidate should have an interest in practicing general otolaryngology in a community-based setting.

This practice is in a satellite office in Southern Maryland located in St. Mary's County, the fastest growing county in Maryland. The candidate will be joining a well-established practice in a thriving community with limited competition and access to an ambulatory surgery center. Salary will be extremely competitive, and there is potential for **no on-call Emergency Department duties**. The practice is easily accessible to three city centers- Richmond, VA, Washington, DC and Annapolis, MD. This area of 120,000+ residents is an ideal choice for medical professionals seeking work-life balance in a picturesque setting, adjacent to nearly 400 miles of shoreline and waterfront living. St. Mary's County boasts top-notch schools, and proximity to three international airports.

This is a perfect opportunity to join a community based practice under the umbrella of a large health care system. MedStar Washington Hospital Center is the largest not-for-profit teaching hospital in metropolitan Washington, DC. The Hospital is part of MedStar Health, a \$2.7 billion not-for-profit healthcare organization, with a community-based network of ten hospitals, and comprehensive healthcare services in the Baltimore-Washington region. This network is the largest health system and one of the largest employers in the Baltimore/Washington area.

Interested applicants should forward an updated CV to:

Stanley Chia, M.D., F.A.C.S.
Chairman
Department of Otolaryngology-Head and Neck Surgery
MedStar Washington Hospital Center
110 Irving Street NW, GA-4
Washington, DC 20010
202-877-6219
email: stanley.h.chia@medstar.net

Neurotologist

The University of Utah, Department of Surgery, Division of Otolaryngology-Head and Neck Surgery seeks a Neurotologist. This is a full-time Assistant Professor level position, track DOQ. Candidates must be BC/BE. Position available July 2019.

Applicants must apply at:
<http://utah.peopleadmin.com/postings/76815>
For additional information, contact:
Susan Harrison
University of Utah School of Medicine
50 North Medical Drive 3C120
Salt Lake City, Utah 84132
Phone: (801) 585-3186
Fax: (801) 585-5744
E-mail: susan.harrison@hsc.utah.edu

The University of Utah Health (U of U Health) is a patient focused center distinguished by collaboration, excellence, leadership, and respect. The U of U Health values candidates who are committed to fostering and furthering the culture of compassion, collaboration, innovation, accountability, diversity, integrity, quality, and trust that is integral to our mission.

The University of Utah is an Affirmative Action/Equal Opportunity employer and does not discriminate based upon race, national origin, color, religion, sex, age, sexual orientation, gender identity/expression, status as a person with a disability, genetic information, or Protected Veteran status. Individuals from historically underrepresented groups, such as minorities, women, qualified persons with disabilities and protected veterans are encouraged to apply. Veterans' preference is extended to qualified applicants, upon request and consistent with University policy and Utah state law. Upon request, reasonable accommodations in the application process will be provided to individuals with disabilities. To inquire about the University's nondiscrimination or affirmative action policies or to request disability accommodation, please contact: Director, Office of Equal Opportunity and Affirmative Action, 201 S. Presidents Circle, Rm 135, (801) 581-8365.

The University of Utah values candidates who have experience working in settings with students from diverse backgrounds, and possess a strong commitment to improving access to higher education for historically underrepresented students.



**FACULTY POSITION:
HEAD AND NECK SURGICAL ONCOLOGY and
ADVANCED HEAD AND NECK RECONSTRUCTION**

The Division of Surgery at Baptist MD Anderson Cancer Center is seeking a fellowship-trained, patient-focused, academically-oriented, head and neck cancer surgeon with microvascular flap reconstruction skills to join the distinguished and rapidly-growing team comprising our head and neck surgical oncology program.

Baptist MD Anderson brings an unprecedented level of oncology care to Northeast Florida and provides physicians an appealing blend of community focused patient care and the benefit of an academic-oriented model. Baptist Health is proud to be the regions' most preferred healthcare provider, one of only seven health systems in the United States chosen to replicate MD Anderson Cancer Center's multidisciplinary and proven model of care, and the Southeast patient care hub for MD Anderson Cancer Network®, a program of MD Anderson.

The Baptist MD Anderson Head and Neck Cancer Program features a uniquely specialized, multidisciplinary team centered on a collaborative approach that brings together the expertise of surgery, radiology, medical and radiation oncology, pathology, dentistry, speech pathology, psychology and dedicated patient care navigators. Our program also features rehabilitation, genetic testing and counseling and survivorship programs and support. Baptist MD Anderson will soon open a brand-new, 330,000 square foot, patient centered, state-of-the art facility dedicated to the full spectrum of oncology care.

The ideal candidate will be board-certified or board-eligible, demonstrate a commitment to multidisciplinary oncology care, have a record of clinical and academic accomplishment, possess the skills and experience necessary to establish and maintain an active clinical practice and develop areas of productive scholarship sufficient to warrant appointment as an Adjunct Assistant Professor, Associate Professor, or Professor of Surgery at the University of Texas MD Anderson Cancer Center in Houston. Review of applications will continue until the position is filled.

Northeast Florida offers world-renowned quality of life and is thriving with miles of beaches and waterways, professional sports teams, a strong economy, championship golf courses, exceptionally diverse cultural experiences and wildly abundant natural resources. The area serves as home to top-ranked schools and some of the best cost of living and recreation that the Sunshine State has to offer. Immediately within reach are world famous destinations, attractions, theme parks and entertainment for families of all ages. Recently ranked by Forbes Magazine as one of the top two most desirable cities for relocation in the United States, Jacksonville offers the ideal setting to call home.

Baptist MD Anderson is an equal opportunity employer who recognizes the value which evolves from a diverse faculty.

Interested candidates should submit their CV and a letter describing their clinical and academic interests to:

Christopher M. Pezzi, MD, FACS
Head, Division of Surgery, and Surgeon-in-Chief
Email: bmdacc.md@bmcjax.com

Otology, Neurotology, and Skull Base Surgery

**USC Caruso Department of Otolaryngology -
Head and Neck Surgery, Los Angeles, California**



Seeking an Assistant, Associate, or Full Professor

We are seeking a board-certified Neurotologist to join the Division of Otology, Neurotology, and Skull Base Surgery. Faculty rank will be determined by the qualifications and experience of the candidate.

We have a busy practice with a large surgical volume and we need another neurotologist to join our group. Candidates with a wide range of career goals will be entertained. These may include, for example, a junior physician eager to build a busy practice, a clinician-scientist with a solid history of research experience and grant funding, or a senior physician interested in a Division Chief role. An important criterion is proficiency in vestibular schwannoma, lateral skull base surgery, and cochlear implantation. Our Department and Medical School offers tremendous research and educational opportunities and all faculty are expected to pursue scholarly activities as part of their career.

The University of Southern California (USC), founded in 1880, is the largest private employer in the City of Los Angeles. As an employee of USC, you will be a part of a world-class research university and a member of the "Trojan Family," which is comprised of the faculty, students and staff that make the university what it is.

The University of Southern California strongly values diversity and is committed to equal opportunity in employment. Women and men, and members of all racial and ethnic groups, people with disabilities, and veterans are encouraged to apply.

John S. Oghalai, MD
Tiber Alpert Professor and Chair
USC Caruso Department of
Otolaryngology-Head and Neck Surgery
1540 Alcazar, Suite 204
Los Angeles, CA 90033
Ph: (323) 442-2312
john.oghalai@med.usc.edu

University of Missouri
Department of Otolaryngology—
Head and Neck Surgery



Seeks clinicians, teachers, and researchers who are personable, energetic and innovative to join a rapidly growing and collaborative group of physicians, most of whom have subspecialty interests and training. There are three Faculty opportunities at all academic ranks (Assistant/Associate Professor or Professor) available:

- **Pediatric Otolaryngologist**
- **General Otolaryngologist**
- **Head and Neck Microvascular Surgeon**

Title, track, and salary are commensurate with experience. These positions are affiliated with MU Health Care which include the University of Missouri Hospital and the MU Women and Children's Hospital.

- Competitive production incentive
- Established research program focusing on voice and swallow disorders
- Well established and expanding hospital system
- Ranked by *Money and Forbes* magazines for career growth and best places to live.

For additional information about the positions, please contact:

Robert P. Zitsch III, M.D.
William E. Davis Professor and Chair
Department of Otolaryngology—Head and Neck Surgery
University of Missouri—School of Medicine
One Hospital Dr MA314 DC027.00
Columbia, MO 65212
zitschr@health.missouri.edu

To apply for a position, please visit the MU web site at

hrs.missouri.edu/find-a-job/academic/
The University of Missouri is an Equal Opportunity/Access/Affirmative Action/Pro Disabled & Veteran Employer.

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General Otolaryngologist:

Cleveland Clinic is seeking a full-time general otolaryngologist to manage both adult and pediatric ear, nose and throat problems in a tertiary care academic center. The physician will practice at community locations and the main academic campus. The otolaryngology program is part of the Cleveland Clinic's Head & Neck Institute, a comprehensive, multi-disciplinary team that includes dentistry, oral surgery, speech and audiology. Cleveland Clinic's otolaryngology program is nationally ranked by *U.S. News & World Report*.

Join our team of 12 general otolaryngologists and 15 subspecialists. Outstanding benefits provided including tail coverage and no restrictive covenant. Robust resources offered for professional development including leadership, education, and management tracks as well as a formal mentorship program available for faculty.

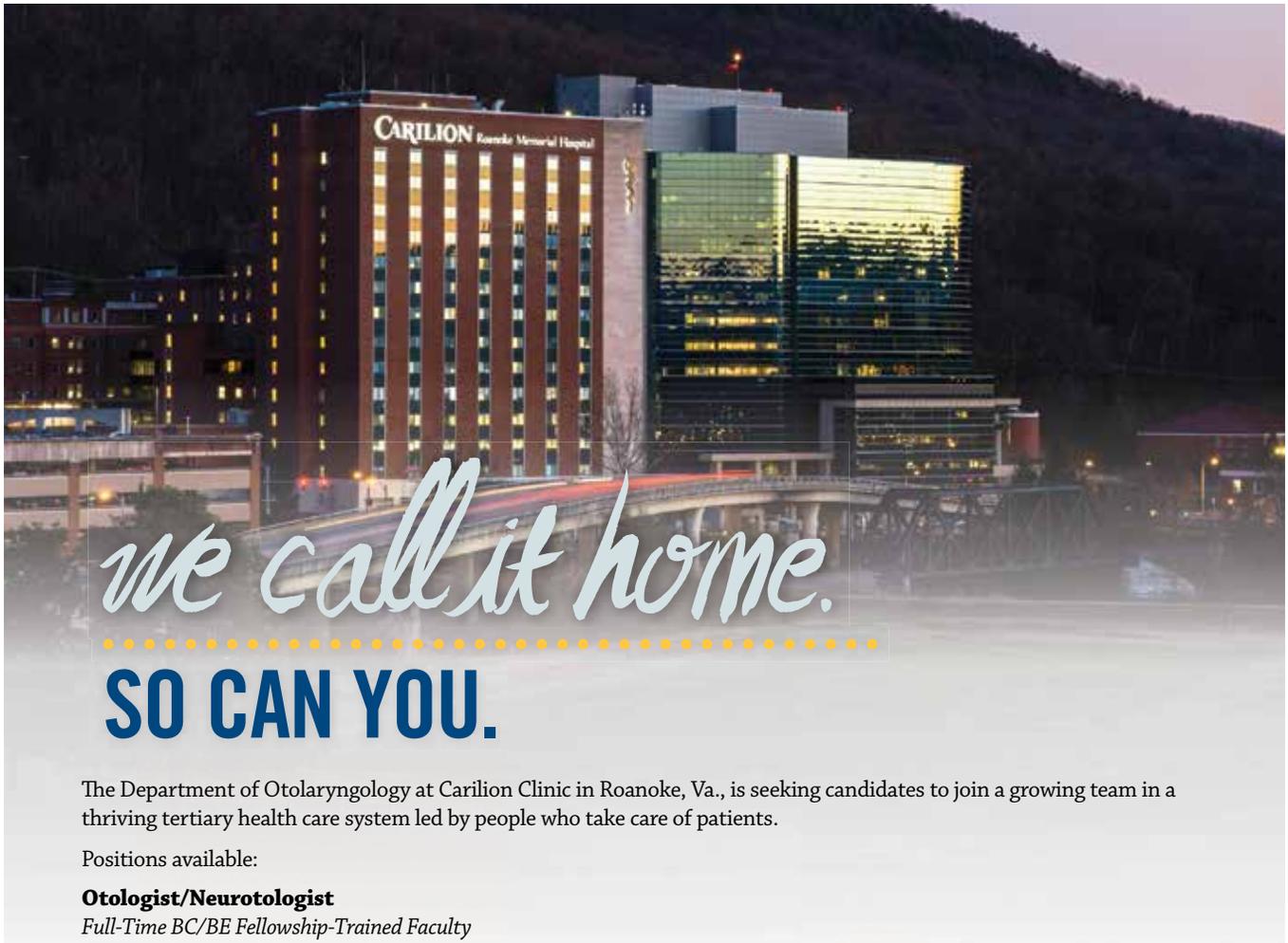
To apply online, visit jobs.clevelandclinic.org/physicians



Cleveland Clinic is pleased to be an equal employment/affirmative action employer: Women/Minorities/Veterans/Individuals with Disabilities. Smoke-free/ drug-free environment.



Every life deserves world class care.



The Department of Otolaryngology at Carilion Clinic in Roanoke, Va., is seeking candidates to join a growing team in a thriving tertiary health care system led by people who take care of patients.

Positions available:

Otologist/Neurotologist

Full-Time BC/BE Fellowship-Trained Faculty

Treat a diverse patient population with a wide range of opportunities, strong audiology support, an active cochlear implant program and an academic neurosurgery program motivated to create partnerships.

H&N Oncologist/Reconstructive Surgeon

Full-Time BC/BE Fellowship-Trained Faculty

Join an established head and neck cancer practice with multidisciplinary care to treat patients with all stages of neoplastic disease as well as a broad endocrine population. Microvascular experience strongly preferred. Robotic technology and team available.

General Otolaryngologist

Full-Time BC/BE Faculty

Build a diverse practice caring for patients of all ages in all areas of otolaryngology. Opportunity for concentration in areas of specific interest. Ambulatory surgical center available.

System Highlights

- » Only Virginia hospital, and one of only 48 nationwide, named “High Performing” in all nine adult procedures and conditions rated by U.S. News & World Report (Roanoke)
- » Five-star rating for patient experience by Press Ganey (CTCH)

Direct inquiries to Chief of Otolaryngology, Dr. Benjamin Cable, at bbcable@carilionclinic.org



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SOUTH FLORIDA ENT ASSOCIATES



South Florida ENT Associates, a fifty-five physician group practice operating in Miami-Dade, Broward and Palm Beach Counties, 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

**UNIVERSITY OF WISCONSIN - MADISON
 ASSISTANT/ASSOCIATE PROFESSOR (CHS)
 PEDIATRIC OTOLARYNGOLOGIST**

The Department of Surgery at the UW School of Medicine and Public Health is seeking an exceptional board certified/board eligible otolaryngology-head and neck surgeon with fellowship training in pediatric otolaryngology. You will join a thriving clinical practice and participate in the education of medical students, residents and advanced practice providers.

Don't miss this wonderful opportunity to join UW Otolaryngology at our state of the art American Family Children's Hospital. American Family Children's Hospital is a Top 50 Children's Hospital per US News and World Report, with four existing pediatric otolaryngology faculty in a comprehensive tertiary/quaternary care outpatient and inpatient practice. This is an excellent opportunity for a pediatric otolaryngologist who seeks a comfortable standard of living combined with an academic practice that affords a wide range of research, teaching, and clinical opportunities.

Rank and faculty track will depend on candidate's interests and academic background. Candidates must be eligible for licensure in Wisconsin.

Interested candidates should go to <https://jobs.wisc.edu/> PVL #95155

UW-Madison is an equal opportunity/affirmative action employer. Women and minorities are encouraged to apply. Unless confidentiality is requested in writing, information regarding applicants must be released upon request. Finalists cannot be guaranteed confidentiality. Wisconsin open records and caregiver laws apply. A background check will be conducted prior to offer of employment.



Multiple Positions Available

The University of Florida Department of Otolaryngology is seeking applicants who wish to pursue an academic career in Pediatric Otolaryngology, Otolaryngology/Neurotology, Head & Neck Oncology or General Otolaryngology at the rank of Assistant, Associate, or Full Professor. Track and rank will be commensurate with experience. The department has 11 full-time faculty members and 15 residents. The desired candidate should possess a strong commitment to both clinical practice as well as resident teaching. Applicants should be board certified or board eligible and licensed (or eligible) to practice in Florida. Significant relevant clinical experience and/or fellowship training in the chosen field is desired. Salary is negotiable and will be commensurate with experience and training.

To Apply, please go to explore.jobs.ufl.edu, search using "Otolaryngology, Gainesville". After applying, please send your CV and cover letter to the appropriate person below:

Pediatric Otolaryngology
 Attn: William Collins, MD
 email: william.collins@ent.ufl.edu

Otolaryngology/Neurotology
 Attn: Neil Chheda, MD
 email: neil.chheda@ent.ufl.edu

Head & Neck Oncologist
 Attn: Peter Dziegielewski, MD
 email: peter.dziegielewski@ent.ufl.edu

General Otolaryngology
 Attn: Brian Lobo, MD
 email: brian.loblo@ent.ufl.edu

The University of Florida is an equal opportunity institution dedicated to building a broadly diverse and inclusive faculty and staff.



Otolaryngology

Call This "Top 10" Community Home

McFarland Clinic is seeking a BE/BC Otolaryngologist to join our extraordinary team and provide exceptional care within Iowa's largest multidisciplinary clinic.

Consistently ranked in the top 10 "Best Places to Live by

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- daVinci Robot and the Olympus Video System
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- New state-of-the-art minor procedure room
- Epic EMR System
- Weekly cancer case conference
- Established, collegial team and support staff
- Physician owned and governed
- Large, established referral network
- One of the least litigious states in the country
- "#1 Best State to Practice Medicine" - *WalletHub*



Ames, Iowa is a family friendly town that offers top-quality education with the best school district in the state. This Big 12 city has been voted the "Best College Town" by Livability.com. Our proud community boasts the cultural, recreational and entertainment amenities of a big city while maintaining the charm that you would expect from small-town living. Welcome to Ames, a place that will quickly become your hometown.

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Contact Doug Kenner

866.670.0334 or dkenner@mountainmed.net



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MedStar Washington
Hospital Center

The Department of Otolaryngology-Head and Neck surgery at MedStar Washington Hospital Center seeks a BC/BE physician for a full time position. The candidate should have an interest in practicing general otolaryngology in a community-based setting.

This practice opportunity is located in satellite offices in Brandywine and Waldorf, MD. The candidate will join three other physicians in a busy otolaryngology practice with access to a new, on-site ambulatory surgery center. Brandywine and Waldorf are thriving communities located within 20-30 minutes commuting distance of Washington, DC and Alexandria, VA. This is an excellent opportunity to join the premier medical system in the Nation's Capital region.

MedStar Washington Hospital Center is the largest not-for-profit teaching hospital in metropolitan Washington, DC. It is a tertiary referral center, and the Otolaryngology Department offers the full range of services for treating ear, nose, and throat conditions. The Hospital is part of MedStar Health, a \$2.7 billion not-for-profit healthcare organization and a community-based network of ten hospitals and other healthcare services in the Baltimore-Washington region. This network is the largest health system and one of the largest employers in the Baltimore/Washington area.

Interested applicants should forward an updated CV to:

Stanley Chia, M.D., F.A.C.S.
Chairman

Department of Otolaryngology-Head and Neck Surgery
MedStar Washington Hospital Center
110 Irving Street NW, GA-4
Washington, DC 20010
202-877-6219
email: stanley.h.chia@medstar.net



Washington University in St. Louis

SCHOOL OF MEDICINE

Academic Faculty Position, Pediatric Otolaryngology

The Department of Otolaryngology-Head and Neck Surgery at Washington University School of Medicine invites applications for a full-time faculty position at the Assistant or Associate Professor level in the Division of Pediatric Otolaryngology. Fellowship training in Pediatric Otolaryngology is required. We encourage candidates with a commitment to education and research to apply. This position will include patient care responsibilities at St. Louis Children's Hospital and the Children's Specialty Care Center. Candidates must be able to obtain a Missouri State license and must be board certified or eligible for certification. Interested applicants are invited to submit their CV on the WUSM website at: <https://facultyopportunities.wustl.edu>

Keiko Hirose, MD

Division Chief, Pediatric Otolaryngology

Department of Otolaryngology-Head & Neck Surgery

Washington University School of Medicine

Washington University in St. Louis is committed to the principles and practices of equal employment opportunity and affirmative action. It is the university's policy to recruit, hire, train, and promote persons in all job titles without regard to race, color, age, religion, gender, sexual orientation, gender identity or expression, national origin, veteran status, disability, or genetic






**CLINICAL FELLOWSHIP IN
LARYNGEAL SURGERY AND VOICE DISORDERS
Massachusetts General Hospital**

The Division of Laryngeal Surgery is seeking applicants for clinical fellowship positions. The fellowship training covers all aspects of laryngeal surgery, voice disorders, and management of the professional voice. The curriculum will provide a wide range of experiences, including phonosurgery (cold instruments and lasers), laryngeal framework surgery, novel operating-room and office-based laser (Pulsed-KTP, Thulium) treatment, complex laryngeal stenosis with aortic homograft transplantation, and the use of botulinum toxin injections for spasmodic dysphonia. The fellow will participate in the management of voice disorders and clinical research as a member of a multidisciplinary team (voice scientists and speech pathologists) that has access to state-of-the-art voice clinic and surgical engineering laboratory facilities. The research fellowship provides numerous opportunities to focus on grant-funded (NIH and private foundations) clinical and basic science research projects in collaboration with interdisciplinary teams of scientists and clinicians at the Massachusetts Institute of Technology and the Wellman Laboratories of Photomedicine at the Massachusetts General Hospital. The option to collaborate with local music conservatories is also available. Qualified minority and female candidates are encouraged to apply. Send curriculum vitae and three letters of recommendation. The Massachusetts General Hospital is a teaching affiliate of Harvard Medical School.

Direct inquiries to:
Steven M. Zeitels, MD, FACS
Eugene B. Casey Professor of Laryngeal Surgery, Harvard Medical School
Director: Center for Laryngeal Surgery & Voice Rehabilitation
Massachusetts General Hospital
One Bowdoin Square, 11th Floor
Boston, MA 02114
Telephone: (617) 726-0210 Fax: (617) 726-0222
zeitels.steven@mgh.harvard.edu






Complete Care. Trusted Doctors.
Ear | Nose | Throat | Allergy

We are a well-established, highly respected ENT private practice in Columbia, SC in search of an additional general otolaryngologist with subspecialty training in Otolaryngology/lateral skull base. Position is open to both new graduates and experienced physicians.

Our practice strives for ideal patient care in a friendly, pleasant work environment. We serve the greater Columbia area through two office locations where we provide comprehensive ENT and allergy services, audiology services including hearing aids, and CT scanning.

Outpatient surgery is performed in our physician owned ambulatory surgery center with potential buy in opportunity for physicians joining our practice. We offer a competitive compensation package.

The Columbia area is a great place to live with year round outdoor activities, family friendly community, and easy access to mountains and coastal beaches. The cost of living here is relatively low. Theater, symphony, excellent dining, white water kayaking, fly fishing, NCAA Division I athletics, and a host of other opportunities for recreation and community involvement are readily available.

Contact information:
Please send resumes to HR@centamedical.com

Rush University Medical Center, Chicago
Director, Oak Brook Otolaryngology

The Department of Otorhinolaryngology Head & Neck Surgery at Rush University Medical Center is seeking a full-time faculty member to join our Department as the **Director of Oak Brook Otolaryngology**, a position which will focus on comprehensive otolaryngology. The selected individual will have an opportunity to join a department of 12 full-time and 2 part-time faculty spanning the entire spectrum of otorhinolaryngology subspecialties and have the opportunity to expand this highly ranked* program. The Director will be the full-time anchor for the Department with a complement of subspecialists staffing the Oak Brook Otorhinolaryngology practice. Qualified candidates must possess a strong commitment to patient care, resident education, and research. Candidates should be BE/BC and eligible for faculty appointment at the Assistant or Associate Professor level.

Rush University Medical Group is a multidisciplinary group of about 1,500 providers, clinical staff and administrators who deliver state-of-the-art, patient-centric medical care to the communities we serve. The Rush Oak Brook Outpatient Center will feature a multispecialty, state-of-the-art **outpatient surgery center** at which the Director will have operating privileges; 65 exam rooms for patients; physical and occupational therapy; a laboratory; and full imaging services, including MRI, X-ray and CT imaging as well as a comprehensive breast imaging program with ultrasound and bone densitometry. The 100,000-square-foot facility is a joint venture with Midwest Orthopedics at Rush. Rush is ranked in 8 of 16 categories in U.S. News & World Report's 2016-2017 "America's Best Hospital's" issue, and is one of the two top-ranked hospitals in Illinois overall. *Rush was also ranked 33rd in the nation in Ear, Nose and Throat and the highest for the specialty in Illinois. To learn more about Rush University Medical Center, please visit www.JoinRush.org.

Interested candidates should address cover letters to **Pete S. Batra, MD**, Chairperson, Department of Otorhinolaryngology and submit with a CV to Rose Sprinkle, Manager, Faculty Recruitment at Rose_Sprinkle@rush.edu

Rush is an Equal Opportunity Employer



OTOVEL[®] (ciprofloxacin and fluocinolone acetonide) otic solution

Brief Summary of Prescribing Information

1 INDICATIONS AND USAGE

OTOVEL is indicated for the treatment of acute otitis media with tympanostomy tubes (AOMT) in pediatric patients (aged 6 months and older) due to *Staphylococcus aureus*, *Streptococcus pneumoniae*, *Haemophilus influenzae*, *Moraxella catarrhalis*, and *Pseudomonas aeruginosa*.

2 DOSAGE AND ADMINISTRATION

- OTOVEL is for otic use only. It is not for ophthalmic use, or for injection.

The recommended dosage regimen is as follows:

- Instill the contents of one single-dose vial 0.25 mL into the affected ear canal twice daily (approximately every 12 hours) for 7 days. Use this dosing for patients aged 6 months of age and older.
- Warm the solution by holding the vial in the hand for 1 to 2 minutes. This is to avoid dizziness, which may result from the instillation of a cold solution into the ear canal.
- The patient should lie with the affected ear upward, and then instill the medication.
- Pump the tragus 4 times by pushing inward to facilitate penetration of the medication into the middle ear.
- Maintain this position for 1 minute. Repeat, if necessary, for the opposite ear [see *Instructions for Use*].

3 DOSAGE FORMS AND STRENGTHS

Otic Solution: Each single-dose vial of OTOVEL (ciprofloxacin 0.3 % and fluocinolone acetonide 0.025 %) delivers 0.25 mL of solution equivalent to ciprofloxacin 0.75 mg and fluocinolone acetonide 0.0625 mg.

4 CONTRAINDICATIONS

OTOVEL is contraindicated in:

- Patients with known hypersensitivity to fluocinolone acetonide or other corticosteroids, ciprofloxacin or other quinolones, or to any other components of OTOVEL.
- Viral infections of the external ear canal, including varicella and herpes simplex infections and fungal otic infections.

5 WARNINGS AND PRECAUTIONS

5.1 Hypersensitivity Reactions

OTOVEL should be discontinued at the first appearance of a skin rash or any other sign of hypersensitivity. Serious and occasionally fatal hypersensitivity (anaphylactic) reactions, some following the first dose, have been reported in patients receiving systemic quinolones. Some reactions were accompanied by cardiovascular collapse, loss of consciousness, angioedema (including laryngeal, pharyngeal or facial edema), airway obstruction, dyspnea, urticaria and itching. Serious acute hypersensitivity reactions may require immediate emergency treatment.

5.2 Potential for Microbial Overgrowth with Prolonged Use

Prolonged use of OTOVEL may result in overgrowth of non-susceptible bacteria and fungi. If the infection is not improved after one week of treatment, cultures should be obtained to guide further treatment. If such infections occur, discontinue use and institute alternative therapy.

5.3 Continued or Recurrent Otorrhea

If otorrhea persists after a full course of therapy, or if two or more episodes of otorrhea occur within 6 months, further evaluation is recommended to exclude an underlying condition such as cholesteatoma, foreign body, or a tumor.

6 ADVERSE REACTIONS

The following serious adverse reactions are described elsewhere in the labeling: Hypersensitivity Reactions [see *Warnings and Precautions* (5.1)]

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice.

In clinical trials, 224 patients with AOMT were treated with OTOVEL for a median duration of 7 days. All the patients received at least one dose of OTOVEL. There were 220 patients who received at least one dose of ciprofloxacin (CIPRO) and 213 patients received at least one dose of fluocinolone acetonide (FLUO). The most common adverse reactions that occurred in 1 or more patients are as follows:

Table 1: Selected Adverse Reactions that Occurred in 1 or more Patients in the OTOVEL Group

Adverse Reactions ¹	Number (%) of Patients		
	OTOVEL N=224	CIPRO N=220	FLUO N=213
Otorrhea	12 (5.4%)	9 (4.1%)	12 (5.6%)
Excessive granulation tissue	3 (1.3%)	0 (0.0%)	2 (0.9%)
Ear infection	2 (0.9%)	3 (1.4%)	1 (0.5%)
Ear pruritus	2 (0.9%)	1 (0.5%)	1 (0.5%)
Tympanic membrane disorder	2 (0.9%)	0 (0.0%)	0 (0.0%)
Auricular swelling	1 (0.4%)	1 (0.5%)	0 (0.0%)
Balance disorder	1 (0.4%)	0 (0.0%)	0 (0.0%)

¹Selected adverse reactions that occurred in ≥ 1 patient in the OTOVEL group derived from all reported adverse events that could be related to the study drug or the drug class.

6.2 Postmarketing Experience

The following adverse reactions have been identified during postapproval use of ciprofloxacin and fluocinolone acetonide otic solution, 0.3% / 0.025% outside the US. Because these reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure.

- Immune system disorders: allergic reaction.
- Infections and infestations: candidiasis.
- Nervous system disorders: dysgeusia, paresthesia (tingling in ears), dizziness, headache.
- Ear and labyrinth disorders: ear discomfort, hypoacusis, tinnitus, ear congestion.
- Vascular disorders: flushing.
- Skin and subcutaneous tissue disorders: skin exfoliation.
- Injury, poisoning and procedural complications: device occlusion (tympanostomy tube obstruction).

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Risk Summary

OTOVEL is negligibly absorbed following otic administration and maternal use is not expected to result in fetal exposure to ciprofloxacin and fluocinolone acetonide (12.3)].

8.2 Lactation

Risk Summary

OTOVEL is negligibly absorbed by the mother following otic administration and breastfeeding is not expected to result in exposure of the infant to ciprofloxacin and fluocinolone acetonide.

8.4 Pediatric Use

OTOVEL has been studied in patients as young as 6 months in adequate and well-controlled clinical trials. No major differences in safety and effectiveness have been observed between adult and pediatric patients.

8.5 Geriatric Use

Clinical studies of OTOVEL did not include sufficient numbers of subjects aged 65 years and over to determine whether they respond differently from younger subjects. Other reported clinical experience has not identified differences in responses between the elderly and younger patients.

10 OVERDOSAGE

Due to the characteristics of this preparation, no toxic effects are to be expected with an otic overdose of OTOVEL.

Distributed by:
Arbor Pharmaceuticals, LLC
Atlanta, GA 30328

Under license of Laboratorios SALVAT, S.A.

OTOVEL is a registered trademark of Laboratorios SALVAT, S.A.

U.S. Patent No: 8,932,610

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

For more detailed information, see the full prescribing information for Otovel at www.otovel.com or contact Arbor Pharmaceuticals, LLC at 1-866-516-4950.

For the treatment of AOMT in pediatric patients due to *S. aureus*, *S. pneumoniae*, *H. influenzae*, *M. catarrhalis*, and *P. aeruginosa*.

The difference is in the **delivery.**



OTOVEL[®]
ciprofloxacin 0.3% and
fluocinolone acetonide 0.025%



OTOVEL[®] (ciprofloxacin and fluocinolone acetonide) is a sterile solution—not a suspension¹

- Blow-fill-seal (BFS) technology provides sterile manufacturing and packaging²
- Containers are formed, filled, and sealed in a continuous, automated operation³
- BFS technology reduces human intervention in the fill/finish process³
- Every dose is sterile, precise, and preservative free¹

**Delivered in simple,
single-dose vials¹**

- The first and only antibiotic/steroid combination ear drop in single-dose vials⁴
- Single-use vials contain 1 premeasured dose each—dose BID/7 days¹
- No drop counting. No mixing or shaking required¹
- Demonstrated efficacy and safety in 2 clinical trials^{1,5}

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AOMT=acute otitis media with tympanostomy tubes; BID=twice daily.

INDICATIONS

OTOVEL[®] (ciprofloxacin and fluocinolone acetonide) is indicated for the treatment of acute otitis media with tympanostomy tubes (AOMT) in pediatric patients (aged 6 months and older) due to *S. aureus*, *S. pneumoniae*, *H. influenzae*, *M. catarrhalis*, and *P. aeruginosa*.

IMPORTANT SAFETY INFORMATION

Contraindications

OTOVEL is contraindicated in:

- Patients with known hypersensitivity to fluocinolone acetonide or other corticosteroids, ciprofloxacin or other quinolones, or to any other component of OTOVEL.
- Viral infections of the external ear canal, including varicella and herpes simplex infections and fungal otic infections.

The following Warnings and Precautions have been associated with OTOVEL: hypersensitivity reactions, potential for microbial overgrowth with prolonged use, and continued or recurrent otorrhea.

The most common adverse reactions are otorrhea, excessive granulation tissue, ear infection, ear pruritis, tympanic membrane disorder, auricular swelling, and balance disorder.

For additional Important Safety Information, please see Brief Summary of Prescribing Information on adjacent page, and full Prescribing Information available at www.otovel.com.

References: 1. Otovel [package insert]. Atlanta, GA: Arbor Pharmaceuticals, LLC. 2016. 2. Data on file. Arbor Pharmaceuticals, LLC. 3. Guidance for industry: sterile drug products produced by aseptic processing—current good manufacturing practice. Food and Drug Administration. <https://www.fda.gov/downloads/Drugs/Guidances/ucm070342.pdf>. Published September 2004. Accessed March 15, 2018. 4. Orange Book: Approved drug products with therapeutic equivalence evaluations. US Food and Drug Administration. <https://www.accessdata.fda.gov/scripts/cder/ob/default.cfm>. Updated May 17, 2013. Accessed July 15, 2016. 5. Spektor Z, Pumarola P, Ismail K, et al. Efficacy and safety of ciprofloxacin plus fluocinolone in otitis media with tympanostomy tubes in pediatric patients: a randomized clinical trial. *JAMA Otolaryngol Head Neck Surg*. 2017;143(4):341-349.


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