

# bulletin

American Academy of Otolaryngology—Head and Neck Surgery

August 2012—Vol.31 No.08

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American Academy of Otolaryngology—Head and Neck Surgery

August 2012—Vol.31 No.08



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- 22 Companies Exhibiting at the AAO-HNSF 2012 Annual Meeting & OTO EXPO
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\*See exclusive extra information online at <http://goo.gl/HbeoY>

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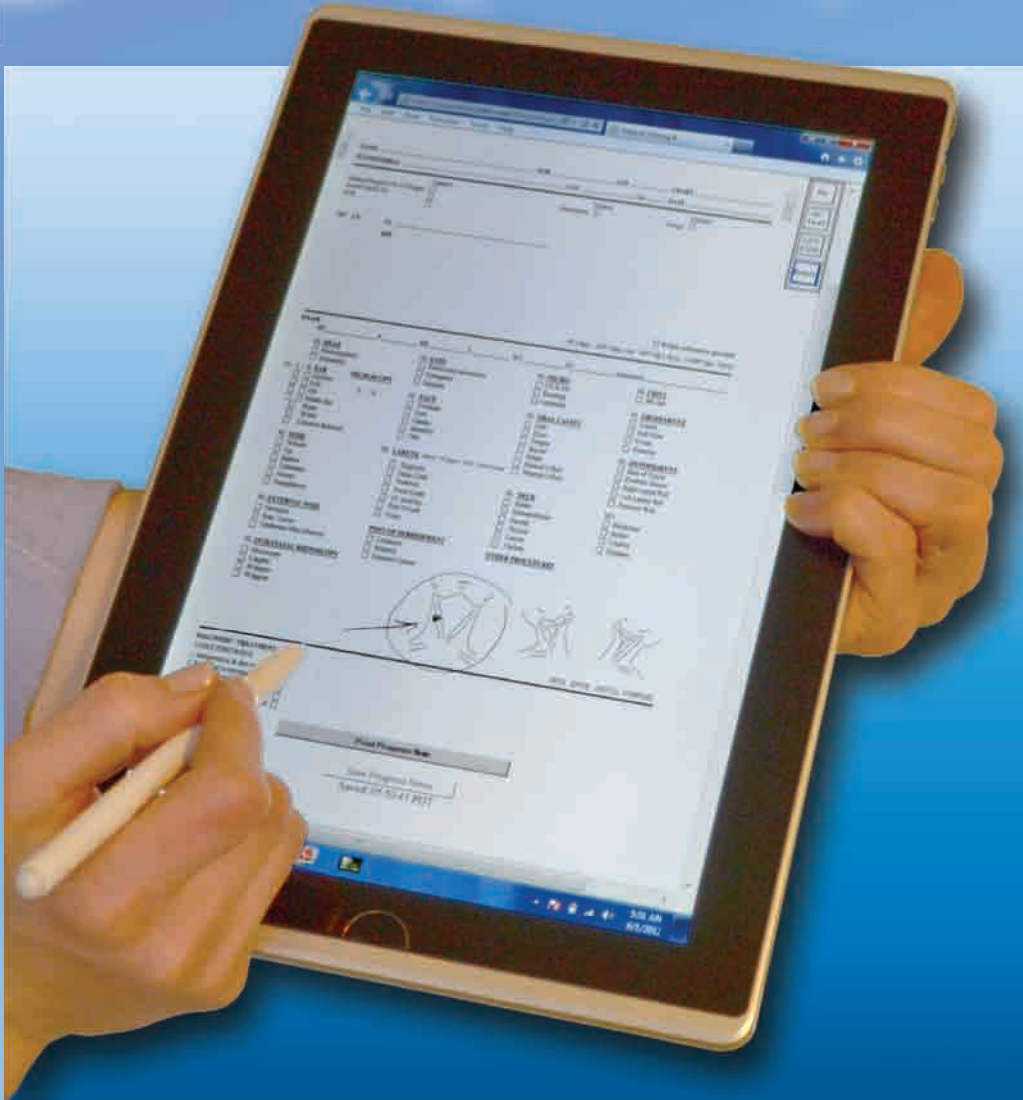
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## AAO-HNS, AAO-HNSF, BOG, SSAC, ABOto: Who Does What?

As we come closer to our yearly Foundation Annual Meeting & OTO EXPO it seemed appropriate to review our corporate structure. What are the relationships between the American Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS, internally called the Academy); the American Academy of Otolaryngology—Head and Neck Surgery Foundation (AAO-HNSF, internally called the Foundation); the Board of Governors (BOG); the Specialty Society Advisory Council (SSAC); and the American Board of Otolaryngology (ABOto)? Why are these structures so complex?

Our roots start with Hal Foster, MD, who took it on himself to organize a meeting of practicing ophthalmologists and otolaryngologists in Kansas City, MO, in 1896. This two-day session resulted in the formation of the Ophthalmological, Otological, Laryngological, and Rhinological Association. This organization was instrumental in creating the first specialty boards in the United States: the American Board of Ophthalmology in 1917 and the American Board of Otolaryngology in 1924. Contrary to some misconceptions, there is no relationship between the Academy or the Foundation and ABOto. The missions of the organizations are different. The mission of ABOto is to ensure that certified diplomates have met the professional standards of training and knowledge that define otolaryngology—head and neck surgery. In other words, ABOto's mission is to test your knowledge of otolaryngology and provide you with an accepted document of your expertise.

As expertise and interests of ophthalmologists and otolaryngologists diverged, our original association inevitably underwent an orderly separation in 1978 into the American Academy of Ophthalmology and the American Academy of Otolaryngology. Two years later we added “Head and Neck Surgery” to our name (AAO-HNS) to better reflect the expanded scope of diseases we treat. The function of this state of the association was solely to educate its

membership regarding the diagnosis and treatment of head and neck diseases.

Earlier, in 1965, with the passage of Medicare and the federal government's participation in healthcare, it became clear that otolaryngology—head and neck surgery needed an advocate, and the American Council of Otolaryngology was formed in 1968 as a separate entity. To speak with a unified voice, it merged in 1982 with our current organizations of the Academy and Foundation (AAO-HNS/F). The Board of Governors was also incorporated in the same year as a grassroots organization of the Academy to advise the Board of Directors. In 2009, the SSAC was formed to ensure that the AAO-HNS/F Boards would have the advice and perspectives of our diverse member interests.

Both AAO-HNS and the AAO-HNSF (AAO-HNS/F) have the vision of empowering otolaryngologist-head and neck surgeons to deliver the best patient care and the mission of helping our members to achieve excellence and provide the best ear, nose, and throat care through professional and public education, research, and health policy advocacy. Both organizations are recognized as nonprofit entities, but there are significant differences in their activities as a consequence of their IRS designations.

The Academy is designated as a 501(c)(6) organization, which is permitted to advocate and lobby with fewer restrictions and functions as a “trade association” with its own political action committee (ENT PAC) that has its own funding for political contributions. Think of it as “the Academy advocates” for its membership and patients. The Academy is involved with advocating in legislative affairs, socioeconomic and regulatory affairs, practice management, public relations, and member relations, via the *Bulletin*.

The BOG is the “grassroots” arm of the Academy. The BOG chair, chair-elect, and past chair are members of the AAO-HNS/F Boards of Directors and are eligible to vote on both boards. The chair and chair-elect




*Rodney Lusk*

**Rodney P. Lusk, MD**  
**AAO-HNS/F President**

are also members of the AAO-HNS/F Executive Committee, but only the chair is eligible to vote. The chair is also a voting member of the Academy's Nominating Committee. The SSAC, like the BOG, is a part of the Academy. Like the BOG, the SSAC has its own bylaws. The chair and chair-elect of the SSAC are eligible to vote on the Academy's Board of Directors.

The Foundation, however, is a 501(c)(3) organization, which is a “public trust” organization with significant limitations regarding its ability to advocate and has no involvement with ENT PAC. Think of the Foundation as education and research. The Foundation sponsors research, provides education, publishes the *Otolaryngology—Head and Neck Surgery* journal, and coordinates our humanitarian efforts. Donations to the Foundation are tax deductible.

I would like to emphasize once more that the Academy and Foundation are two separate organizations. When your Executive Committee and Board meet on a regular basis there are separate agendas for each. I hope this has given you an overview of the Academy and Foundation's organizational structure. You can see that as with all sustaining entities, we change and adapt to better serve our goals. 



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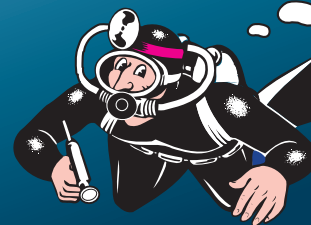


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## Change and Transition

This summer I enjoyed celebrating several graduations. Whether it was for a member of my own family, friends, or graduating residents joining us as otolaryngology colleagues, some of the feelings expressed on each occasion were the same. There is always a great sense of accomplishment, joy in the realization of goals, and even some relief that the “race” has been completed. While celebrations are clearly in order and important to mark, there is another theme that pervades each graduation. It is universally felt that graduation is a time of starting a new phase in life, a realization that after a short rest, new effort in the next step in our education or employment awaits us.

In fact, our lives are marked by new beginnings on a regular basis: assessments of progress are made, accomplishment of goals is celebrated, and measures of success are reported. This can be as prosaic as filing an annual tax return, or as meaningful as starting a new job, buying a new home, approaching a marriage, a birth, or a loved-one’s death. We reflect on change at each new calendar year and how we can “transition” to better our lives.

“We reflect on change at each new calendar year and how we can “transition” to better our lives.”

In his book, *Managing Transitions*, William Bridges describes the difference between change and transition. Change is the shift that takes place in the external situation, while transition is our reaction to that change, or the reorientation that must take place if we are to adapt successfully to that change. Transitions often occur in three stages: endings, neutral zone, and beginnings. Transitioning to change,

especially if that change is unexpected or unwelcome, can remind us of the stages of grief.

Bridges writes that we go through phases of transitioning, beginning with denial. We reflect on the way things used to be, our comfort with the familiar, and we refuse to hear new information that we find unpleasant. This is followed by resistance, characterized by anger, stubbornness, complaining, and doubting one’s ability. These two characteristics—denial and resistance—are a part of the first stage, accepting the ending of what was.

The second stage, or neutral zone, is characterized at first by uncertainty, questioning, disorientation, and sometimes even disorganization. As time progresses, this uncertainty and questioning leads to exploration, seeing possibilities, creating alternatives, potential solutions and adjustments, and learning new skills. The actions or implementation of these new ideas leads to the third stage, that of beginnings. This is a time of commitment, focus, cooperation, and vision. Those who recognize change too late, or refuse to transition, suffer the most. Those who learn early in the neutral zone to consider options, see alternatives, and learn new skills fare better in the changed environment and can even exploit the change to advance their goals.

Renowned business management consultant Geoffrey Moore reinforces these ideas using a different model handed down from decades of experience with the acceptance of new technology: The Technology Adoption Life Cycle. Social science from the 1950s and 1960s formed the foundation of these labels that we all recognize.

In his book, *Escape Velocity*, Moore shows a bell-shaped curve with the labels “innovators and early adopters” on the left tail of the curve and “laggards” on the right tail. Sound familiar? Moore’s work focuses on what he calls the “chasm” or gap that occurs between the early adopters and the much larger group, the early majority. Closing that gap, shortening the time it takes to get new ideas from the




*David R. Nielsen MD*

**David R. Nielsen, MD**  
**AAO-HNS/F EVP/CEO**

innovators to be accepted and used by the pragmatists, is the focus of his work on marketing new technology. Can you see the connection between Moore’s work on “marketing” change and Bridges’ work on transitioning to change? Both teach us much about the importance of understanding how to approach and adapt to our constantly changing world.

As we observe every day, clinical medicine, related technology, and how we pay for and manage care are changing faster than at any other time in history. We must increase our skills in understanding this change, driving that change that is necessary, and adapting successfully to the unavoidable change that characterizes much of our world.

Next month, many annual vacation times may be finished. Medical practices tend to be busier through the fall and winter months. Before this occurs, assess the change you observe in your world. Come to the AAO-HNSF 2012 Annual Meeting & OTO EXPO in Washington, DC. Contribute your voice, your time, and your skills to ensuring that otolaryngologists lead positive change clinically, organizationally, and fiscally, and create a more satisfying experience for our members, better healthcare for our patients, and a more optimistic future for our children. 

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## Responding to Changes in Healthcare: BOG Annual Meeting Events

While our nation prepares for what is sure to be another historic election, otolaryngologists from around the world will meet in September in Washington, DC, for the AAO-HNSF 2012 Annual Meeting & OTO EXPO. The 116th annual meeting promises to be more valuable and exciting than ever, covering a broad range of topics and issues germane to otolaryngologists. Experts in our field will present scientific research, instruction courses, miniseminars, and honorary guest lectures. In addition, the meeting provides unparalleled collaborative and networking opportunities.

“We are physicians and therefore a vital component of the healthcare system, but we will have to learn to survive in this new landscape.”

Though it seems the dust is settling after the U.S. Supreme Court’s decision to uphold the healthcare reform act, once again the flawed Sustainable Growth Rate (SGR) formula threatens deep (27 percent) cuts in Medicare reimbursement. In addition, the fate of the Independent Payment Advisory Board (IPAB) is being debated, and Graduate Medical Education funding is under scrutiny. While these and other issues are being settled, we are fortunate to have the Academy and Board of Governors (BOG) working diligently to protect the interests of otolaryngologists and our patients. As such, the BOG will host a slate of events at the annual meeting designed to engage otolaryngologists from all types of practices. More than ever, otolaryngologists cannot afford to

be uninformed or misinformed, and the annual meeting is the opportune time and place to get up-to-date information.

### Saturday

Leadership skills are critical in the current healthcare environment, and there are countless talented physician leaders among our otolaryngology ranks. Learn how to be an effective physician leader at the BOG Leaders Training Session from noon to 1:00 pm on Saturday, September 8. The training session will be followed by the BOG Socioeconomics & Grassroots Committee Meeting from 1:00 pm to 2:45 pm, and the BOG Legislative Representatives Committee Meeting from 3:00 pm to 4:45 pm. All are welcome at these committee meetings. Come see what these important committees are doing on your behalf.

### Monday

Monday’s program includes the BOG General Assembly Meeting from 5:00 pm to 7:00 pm. As always, all are welcome at the assembly, which features the election of the BOG chair and Member-at-large, committee reports, and awards presentations. If you’ve never attended the BOG General Assembly, let this be your year to check it out.

### Tuesday


Following the positive response to last year’s miniseminar, “Hot Topics in Otolaryngology: 2011,” the BOG Executive Committee is pleased to present “Hot Topics: 2012,” from 10:30 am to 11:50 am on Tuesday, September 11. BOG Secretary **Wendy B. Stern, MD**, will moderate the panel. Returning speaker Raymund C. King, MD, an otolaryngologist and attorney, will discuss hospital-physician joint ventures from a legal perspective. Darlene Burgess, vice president of corporate government affairs for Henry Ford Health System, will review such ventures from an institutional and financial perspective. And the Academy’s Joy L. Trimmer, JD, Senior Director of Government Affairs, will



*Susan R. Cordes, MD*  
**BOG Member-at-Large**

provide a legislative update of issues affecting medicine and otolaryngology, particularly in light of the upcoming elections.

There is no question the landscape of healthcare is changing. Where will physicians fit into that landscape? Will we be the grass that gets walked on, or the brush that fades into the background and everyone looks past? Or will we be the trees that stand tall and strong, yet flexible enough to endure the unpredictable winds of change? We are physicians and therefore a vital component of the healthcare system, but we will have to learn to survive in this new landscape. The Academy and BOG serve as vital resources to help us survive and thrive in the shadow of the Patient Protection and Affordable Care Act, but can do so only with the dedication, support, and engagement of our ranks. It is never too late (or too early) to get informed and get involved, and the annual meeting is an excellent place to start, as Academy activities for the upcoming year get underway.

While the practice of medicine is undergoing drastic changes, the one thing that will not change is the ongoing scrutiny of the delivery and cost of healthcare. In order to advocate for our patients and preserve our ability to provide the best possible care, we will need to stand strong, but also work with our hospitals, legislators, and other interested parties to realistically make changes that will create a healthcare system that allows all of us to thrive. 



Only Governors or the designated alternate governor (i.e., Leg. Rep. or PR Rep.) attending the meeting in lieu of the governor shall have the power to vote on any matter before the Board of Governors.


## Candidate Statements (BOG Member-at-Large)

### Stacey L. Ishman, MD Candidate, BOG Member-at-Large

*What are your qualifications and what is your experience?*

I have had the opportunity to serve the Academy and the Board of Governors in a number of roles during the past 10 years: as a member of numerous committees, guideline reviewer, author of CME educational products, legislative representative to the BOG, and most recently as vice-chair of the BOG Legislative Representative Committee and ex-officio member of the BOG Executive Committee. In addition, I have been an attendee of our advocacy day and BOG meetings for the last 10 years and have been proud to serve in advocacy roles in the past as an AMA delegate for the SRF and as a member of the ENT PAC Board. These experiences have given me an understanding of the role of the BOG in the Academy and allowed me to see how the Academy's strategic plan can be best reflected in the actions of our BOG.

*Given the Academy's strategic plan, outline and prioritize your goals for the Board of Governors.*

Recently, Peter Abramson, MD, and the Socioeconomic and Grassroots Committee proposed a system of regional representation designed to encourage participation at a local/regional level and allow for a greater interchange of ideas and issues. If chosen to serve as the member-at-large, I would like to assist in the integration of this regional network into the BOG, allowing information to be more freely exchanged between the constituent societies and within the BOG. In addition, I would suggest we engage the public relations representatives to serve as regional representatives and as primary facilitators for information sharing. Lastly, I feel that we need to target residents, fellows, and young physicians for inclusion in the BOG and would like to work with the leadership to help facilitate continued engagement with these groups. 



### Sanjay R. Parikh, MD Candidate, BOG Member-at-Large

*What are your qualifications and what is your experience?*

Since completing residency 13 years ago, I have been a dedicated member, participant, supporter, and leader in the Academy's mission.


As the past chair of the Academy's Young Physicians Committee, I served the Academy's Board of Directors and Board of Governors. I was fortunate to work with past-presidents **Richard T. Miyamoto, MD; James C. Denny, III, MD; David W. Kennedy, MD; Ronald B. Koppersmith, MD; and J. Regan Thomas, MD**, during their terms. I have been a participant in many BOG Legislative, Big On Goals, public relations, and executive committee meetings. I have been a presenter, instructor, journal reviewer, Millennium Society member, and Honor Award recipient for the Academy. I have lobbied for healthcare and liability reform on Capitol Hill for five of the last six years on behalf of otolaryngologists.

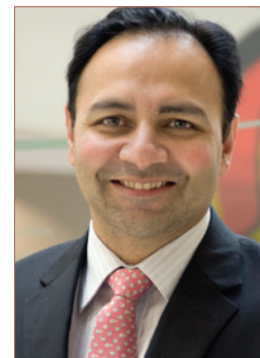
I have also held executive or leadership positions in the American College of Surgeons, AMA, Northwest Academy of Otolaryngology, American Rhinologic Society, and American Society of Pediatric Otolaryngology.

*Given the Academy's strategic plan, outline and prioritize your goals for the Board of Governors.*

My goal on the Board of Governors is to ensure that the Academy recognizes the challenges that private practice and academic otolaryngologists face every day. Specifically, with the ever-increasing frustrations otolaryngologists face with reimbursement, liability threats, and uncertain healthcare reform, our strategic plan must prioritize our members' needs.

As a member of your Board of Governors, I will use my communication and leadership skills to augment advocacy, practice management, and education. I will make sure that we engage our members in advocacy, liability reform, and protection of our scope of practice through our Political Action Committee. I will ensure that our Academy understands the current practice climate by developing programs in EMR and safety, adopting mid-level providers, and optimizing reimbursement.

The Board of Governors was established to provide a voice for its members in private practice and academics. I will do my best to make sure the Academy hears that voice. 



## Connecticut Ear, Nose & Throat Society Receives BOG Model Society Award

The Connecticut Ear, Nose & Throat Society is the recipient of the Board of Governors (BOG) 2012 Model Society Award. The society is represented on the BOG by **Ken Yanagisawa, MD**, as governor, **David S. Boisoneau, MD**, as legislative representative, and **Steven B. Levine, MD**, as immediate past governor and current public relations representative. **Denis C. Lafreniere, MD**, serves as the chair-elect for the BOG.


The Connecticut ENT Society, representing 90 percent of the otolaryngologists practicing in the state, has participated in several public awareness activities already this year, including Doctor's Day at the capital, Hartford, in February; the organization of 10 statewide, free head and neck cancer screenings during Oral and Head and Neck Cancer Awareness Week in April;

and more than 15 health fairs sponsored by both Democratic and Republican senators.

The Society worked effectively with other Connecticut medical societies, under the guidance of Debbie Osborn (executive director for ENT and three other medical specialty organizations), to defeat an effort by trial lawyers to weaken the current Certificate of Merit laws. In addition to participating in this major defeat, the Society also supported coverage for hearing aids in the pediatric population with testimony given in February 2012, to the Insurance Committee and it used its lobbying team to push for truth in advertising legislation, which led to the passage of HB 5045 (2011), an act requiring healthcare providers to display photographic identification badges during working hours. In addition to legislative advocacy,

the Society continues to promote effective practice management awareness and has retained a healthcare attorney to advocate for fair and transparent business and insurance company interactions on behalf of its members.

The Society hosts two educational meetings a year with robust medical education lectures given by distinguished guest lecturers from around the country and state, as well as informative lectures updating the membership on socioeconomic, legal, and practice management trends and issues.

The Connecticut Ear, Nose & Throat Society will be recognized for its exemplary efforts at the Board of Governors General Assembly meeting on Monday afternoon, September 10, in Washington, DC, in salons ABC of the convention center. 



Debbie Osborn  
Executive Director



Ken Yanagisawa, MD  
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1. Manes RP, Tong L, Batra PS.: "Prospective evaluation of aerosol delivery by a powered nasal nebulizer in the cadaver model" *Int Forum Allergy Rhinol*, 2011; 1:366-371

2. Yuri M. Gelfand, MD; Samer Fakhri, MD; Amber Luong, MD, PhD; Seth J. Isaacs, MD & Martin J. Citardi, MD: "A Comparative Study of the Distribution of Normal Saline Delivered by Large Particle Nebulizer vs. Large Volume/Low Pressure Squeeze Bottle" 56th Annual Meeting of the American Rhinologic Society, September 25, 2010, page 38

**N A S O N E B<sup>®</sup>**  
N A S A L   N E B U L I Z E R



## Member Component Events at the Annual Meeting & OTO EXPO

### Board of Governors (BOG)

#### Saturday, September 8

- BOG Leaders Training Luncheon, noon-12:55 pm
- BOG Socioeconomic & Grassroots Committee Meeting, 1:00 pm-2:45 pm
- BOG Legislative Representatives Committee Meeting, 3:00 pm-4:45 pm

#### Monday, September 10

- BOG General Assembly meeting, 5:00 pm-7:00 pm

#### Tuesday, September 11

- BOG Executive Committee Miniseminar "Hot Topics in Otolaryngology: 2012," 10:30 am-11:50 am

### Diversity Committee

#### Tuesday, September 11

- Diversity Committee meeting, 1:00 pm-2:00 pm

### Humanitarian Efforts

Visit the Humanitarian Efforts Booth

#### Sunday, September 9

- Humanitarian Efforts Committee meeting, 2:00 pm-3:00 pm

- Humanitarian Efforts Committee open forum, 3:30 pm-5:30 pm

### Section for Residents and Fellows-in-Training (SRF)

Once again, Monday, September 10, is officially "Residents Day" at the annual meeting. See the schedule below for the special resident-focused events.

#### Sunday, September 9

- AAO-HNSF Academic Bowl, supported by the AAO-HNSF Education Steering Committee, 10:30 am-11:50 am

#### Monday, September 10—Residents Day

- SRF Miniseminar "Section for Residents and Fellows-in-Training Survey Results," 9:30 am-10:20 am
- Section for Residents and Fellows-in-Training (SRF) General Assembly, 2:30 pm-4:30 pm (Note: all Resident Leadership Grant recipients must attend the session in its entirety.)

#### Tuesday, September 11

- SRF Miniseminar "Interviewing: What to Ask and How," 8:00 am-9:20 am
- SRF & YPC Miniseminar "Finding Balance in a Surgical Career," 10:30 am-11:50 am

### Other Highlighted Resident Events (every day)

- Free Instruction Courses for residents who are Academy members
- Poster Presentations
- ENT Careers Live
- AcademyU® Learning Lab

### Women in Otolaryngology (WIO) Section

#### Monday, September 10

- WIO Section committee meetings, 7:00 am-8:00 am (concurrent sessions)
- WIO Section miniseminar "Professional Advancement: Why Gender Differences Matter," 10:30 am-11:50 am
- WIO Luncheon, Kevin Pho, MD, KevinMD.com, social media's leading physician voice, noon-1:00 pm (Note: seating is limited—attendees must have a ticket for entry.)
- WIO General Assembly meeting, 1:00 pm-2:00 pm

### Young Physicians Committee (YPC)

#### Tuesday, September 11

- YPC Committee meeting, 10:30 am-noon

## Dates to Remember

**August 1** Monthly mini-PR and media outreach tools available for members at [www.entnet.org/aboutus/PressRoom.cfm](http://www.entnet.org/aboutus/PressRoom.cfm).

**August 3** AAO-HNSF 2012 Annual Meeting & OTO EXPO advanced registration deadline, visit [www.entnet.org/annual\\_meeting](http://www.entnet.org/annual_meeting)

**August 11 -12** Cheer Coordinator's Conference, email: [kschulz@entnet.org](mailto:kschulz@entnet.org).

**Aug 17-18** Coding Workshop, Hilton Nashville Downtown <http://karenzupko.com/workshops/otolarngology/index.html>.

**August 21** AAO-HNS/F Election voting closes. For voting questions email [ELaguna@entnet.org](mailto:ELaguna@entnet.org).

**September 1** *Bulletin* feature: The Value of Membership.

**September 1** Monthly mini-PR and media outreach tools available for members at [www.entnet.org/aboutus/PressRoom.cfm](http://www.entnet.org/aboutus/PressRoom.cfm).

**September 9 - 12** AAO-HNSF 2012 Annual Meeting & OTO EXPO in Washington, DC.

**September 21-22** Coding Workshop, Wyndham Baltimore Peabody Court

<http://karenzupko.com/workshops/otolarngology/index.html>.

**October 1** *Bulletin* feature: AAO-HNS/F Annual Report.

**October 1** Monthly mini-PR and media outreach tools available for members at [www.entnet.org/aboutus/PressRoom.cfm](http://www.entnet.org/aboutus/PressRoom.cfm).

**October 26-27** Coding Workshop Costa Mesa, CA, Westin South Coast Plaza <http://karenzupko.com/workshops/otolarngology/index.html>.



ASSOCIATION OF  
OTOLARYNGOLOGY  
ADMINISTRATORS

# Is Your Administrator on This List?



The Certification in Otolaryngology Practice Management (COPM) is a certification that defines the knowledge required to successfully manage today's otolaryngology practice. It is awarded to individuals who have demonstrated mastery of the six core competencies specific to otolaryngology practice management. Below is a list of every Certified Otolaryngology Practice Manager and his or her practice – Is your practice on the list? If your manager is not certified, encourage him or her to become a COPM in 2012 to demonstrate his or her knowledge in and dedication to otolaryngology practice management!

Visit [www.AOAnow.org/COPM](http://www.AOAnow.org/COPM) to get your manager started today.

**Karyn Aldridge, COPM** | University of South Florida Dept of Otolaryngology/HNS | Tampa, FL

**Felecia Barfield, COPM** | Coastal ENT/ HNS, PLLC | Gulfport, MS

**James Barlow, COPM** | University Otolaryngologists – Ohio State University | Columbus, OH

**Mark Benninghoff, COPM** | Technology Development Center Bakery Square – UPMC | Pittsburgh, PA

**Lei Anne Bettcher, COPM** | Dubuque ENT | Dubuque, IA

**Karen Boyd, CMM, COPM** | Ashland ENT Allergy & Hearing Aid Center | Ashland, OH

**Renee Brown, COPM** | Baylor Otolaryngology | Houston, TX

**Patricia Brown-Oliver, COPM** | Head & Neck Surgical Associates, Inc | Overland Park, KS

**Jane Byrum, COPM** | Carolina ENT Associates, PA | Gastonia, NC

**Sara Carrillo, COPM** | Dallas ENT- H&N Surgery Center | Dallas, TX

**Stacie Chapman, COPM** | ENT Associates of East Texas | Tyler, TX

**Stacey Conant, COPM** | Cross Timbers ENT Associates | Arlington, TX

**Sarah Cooke, COPM** | Ottawa Shores ENT Associates, PC | Grand Haven, MI

**Danielle DeMaio-DeAngelis, COPM** | Thomas Jefferson University, Department of Otolaryngology/HNS | Philadelphia, PA

**Rodger Egeland, COPM** | Montgomery Otolaryngology | Montgomery, AL

**Melissa Elliott, COPM** | Southern Crescent ENT, PC | Stockbridge, GA

**Gary Fears, COPM** | Lakeland, FL

**Michelle Fiorino, COPM** | ENT & Allergy Associates, LLP | White Plains, NY

**Joanne Gauthier, COPM** | Thomas Jefferson University, Department of Otolaryngology/HNS | Philadelphia, PA

**Sandra Glaspell, CPC, COPM** | Drs. Ellerbe & Kallman, Inc | Anchorage, AK

**Barry Hubert, COPM** | Blue Ridge Ear, Nose and Throat, Inc | Boone, NC

**Lynda Kimm, COPM** | Ear Nose & Throat Specialists, LLC | Conyers, GA

**Susan Kunkel, COPM** | ENT Physicians & Surgeons, PA | Manchester, NH

**Kelly Ladd, COPM, CMPE** | Advanced Ear Nose & Throat Associates, PC | Atlanta, GA

**Willard Allen Mackley, COPM** | Sound Health Services PC | Saint Louis, MO

**Kristine McGriff, COPM** | Oregon Health & Science University Department of Otolaryngology | Portland, OR

**Tracie Minor, COPM** | Sumeet Mathur, MD | Indiana, PA

**Deborah Murphy, COPM** | Ear, Nose & Throat Medicine & Surgery Group | Middletown, RI

**Toni Patterson, COPM** | Connecticut Ear Nose & Throat Associates, PC | Hartford, CT

**Donna Rains, COPM** | Arizona Minimally Invasive Sinus Institute | Phoenix, AZ

**Cristina Randall, CPC, COPM** | Ohio ENT Surgeons, Inc | Columbus, OH

**Terry Stivers, COPM** | Southwest Ohio ENT Specialists, Inc | Dayton, OH

**David Thomas, COPM** | Wolf and Yun PSC | Elizabethtown, KY

**Linda Tidwell, COPM** | Benke Ear, Nose & Throat Clinic | Cleburne, TX

**Darlene Timmerhoff, COPM** | Rocky Mountain ENT Center, PC | Missoula, MT

**Edie Tucker, COPM** | Baton Rouge ENT Associates, LLP | Baton Rouge, LA

**Robin Wagner, CMP, COPM** | Concepts in Meetings & Events | Pittsburgh, PA

**Camille White, COPM** | The ENT Center of Central GA, PC | Macon, GA

**Julie Zetterman, COPM** | Nebraska Medical Center Department of Otolaryngology/HNS | Omaha, NE

**Andy Zutter, COPM** | CENTA | Carmel, IN



## A Thousand Reasons to Join the Millennium Society

September is a special time of year for all of you. For some, this may be your first AAO-HNSF Annual Meeting & OTO EXPO. For others, attending the annual meeting has become a fall custom. From the Opening Ceremony to the last instruction courses on Wednesday afternoon, your days are filled with learning the latest advances in patient care and practice management and networking with your colleagues from around the world. As you continue to empower yourselves and the specialty through this world-class educational event, we would like you to consider supporting the AAO-HNSF through the Millennium Society.

The Millennium Society, established by the Board of Directors, is a group of Academy members who, like you, believe in our mission and generously support achievement of the AAO-HNSF initiatives. The Millennium Society is our philanthropic annual fund program



A member of the Millennium Society uses his computer in the 2011 Millennium Society Donor Appreciation Lounge. To join the Society, visit [www.entnet.org/donate](http://www.entnet.org/donate).

### Special Millennium Society Donor Recognition Offerings

- Access to a special recognition lounge offering complimentary concierge-like experience, including business center services, breakfast, lunch, and snacks throughout the day. Enjoy donor amenity services while relaxing and networking with colleagues.
- Recognition on the highly visible Donor Wall of Honor, in AAO-HNSF publications, on our website, and reserved seating during lunch in the exhibit hall.
- Millennium Society lapel pin, prestigious annual meeting donor ribbon, and special thank you gift.
- Naming opportunities.

that provides a vital means of financial support for the AAO-HNSF mission and is essential to expanding the significant accomplishments of the AAO-HNSF in improving patient care. The 2012 Millennium Society program year runs January 1 through December 31, 2012. Donors are recognized in many special ways (see sidebar).

**Amelia F. Drake, MD, and Samuel B. Welch, MD, PhD**, shared their thoughtful and inspirational quotes while visiting the 2011 Millennium Society Donor Appreciation Lounge. Dr. Drake highlighted many of the important reasons why giving back and joining the Millennium Society is important to her and many others like her.

“Each of us cares...the Millennium Society allows us to translate our care in a meaningful direction whether it be

diversity, women in OTO, education, research, international, or residents and young physicians,” Dr. Drake said.

Dr. Welch shared his thoughts on the influence of the AAO-HNSF and the Millennium Society.

“By ourselves, each of us cannot ensure that our specialty is secured for future generations of otolaryngologists,” Dr. Welch said. “Giving any amount supports the efforts of our Academy to do just that. Giving helps protect our future and that of our patients.”

Membership in the Society is achieved by making an annual gift of at least \$1,000 (\$250 for residents and young physicians). If you are not already a member, please consider a charitable gift in support of your specialty and join the Millennium Society today by visiting [www.entnet.org/donate](http://www.entnet.org/donate).

See you in September! 

## Empty Nest: Crisis, Challenge, or Relief?

By *Kathleen Yaremchuk, MD*  
for the *Women in Otolaryngology Section*

The term “empty nest syndrome” refers to a sense of sadness and loneliness that may occur after a grown child leaves home. Although women and men may parent equally, the primary caregiver is most likely to experience that feeling. The transition affects many tasks considered a major focus of the nurturing parent role, such as organizing or overseeing the typical school activities of athletics, social commitments, and parent-teacher conferences. As a physician and a parent, one makes compromises and decisions on whether to attend soccer games, after-school activities, and parent-teacher conferences or to pursue professional advancement by engaging in research, journal club, specialty medical societies, and departmental meetings.

With limited hours in the day, the opportunity to serve on institutional committees or attend meetings that require travel and time away from home often means missing out on a family dinner or children’s activities. The decision to favor parenting activities instead of professional pursuits isn’t meant to be intentionally detrimental to a career, but is based on priorities at the time. Children aren’t always going to be young and want their parents at a special event. Nevertheless, these commitments can be problematic when the operating room is running late or the on-call emergency beckons. Usually, there are times in every parent’s experience that induce a feeling of guilt because of missed opportunities.

Much of family life revolves around the children’s schedule. When the last child heads off to college or work, parents and the rest of the family often experience a void in social activities. For some, this leads to depression and a loss of purpose. There is often an underlying concern that the child is unprepared for life on his/her own. How will the child survive without the parents?

The challenge is to be emotionally prepared for the change in relationship with the children and to learn to maintain communication without the daily face-to-face at home. Texting, email, and cell phone chats allow frequent contact and communication. Online chats can provide the visual contact that many have come to depend on. The newfound free time can be problematic for some parents while others breathe a sigh of relief. It is a time to reconnect with a spouse and share mutual interests. Travel, hobbies, and professional growth are areas that can be cultivated in a way that was not possible previously. Without the pressure of rushing home to make dinner and sit with the family, there is time to meet with friends and reconnect anew. Similarly, professional contacts that have been made during the years can be leveraged to do research and advance professionally.

The AAO-HNSF Annual Meeting & OTO EXPO, Combined Section Meeting, and Combined Otolaryngology Spring Meetings (COSM) are all opportunities to travel, learn, and spend time with colleagues. The many committees of the AAO-HNS and specialty societies are always looking for members to volunteer time and knowledge to further the aims of otolaryngology. A common misconception is that to become an active participant in our specialty it is necessary to do so right after residency. In fact, the “right time” is whenever you are ready to raise your hand and volunteer for an assignment. There is no dearth of work for the willing participant. All AAO-HNS committees welcome members to attend meetings, even if they are not formal members of the committee. The multitude of committees are listed on the Academy’s website, so make plans to attend a committee meeting that interests you this September in Washington, DC.

Many individuals in academics may have been limited in their activities because of constraints from home. With the freedom of the “empty nest” and




*Kathleen Yaremchuk, MD*

newfound time, an interest in research or leadership can become a reality. Develop a game plan that includes sharing your goals with the chair of the department, dean, or chief medical officer. Sign up for courses offered internally or through affiliated institutions that will help you grow. Similarly, mentors within the department or in other departments can give advice and help in reinventing yourself. Professional volunteerism will help in many ways, too.

It is never too late to learn and challenge yourself personally or professionally. While much of this discussion has centered on professional development, the spirit of volunteerism can be given to the community or spiritual institutions. It’s important to recognize what gives you happiness and fulfillment at the end of the day.

Keep in mind, just when you are recovering from the empty nest and bursting with energy, the kids may come home. This new phenomenon has been described by social psychologists as the “boomerang kids.” They are adult children between the ages of 25 and 34 who live with their parents after college because they “want the limited responsibility of childhood and the privileges of adults.”

So take advantage of your empty nest freedom and look over your shoulder for the “boomerang” effect. 

# Destination OTO EXPO!

One of the most exciting components of the AAO-HNSF annual meeting is the OTO EXPO.

Here you'll find an extensive showcase of products and services for otolaryngologist-head and neck surgeons.

For first-time attendees, the OTO EXPO will soon become a can't-miss experience and an invaluable resource.

The OTO EXPO annually brings in an average of 300 companies that cater to every aspect of your practice—device manufacturers, pharmaceutical companies, collections, EMR systems, waiting room solutions, financial management firms, and more.

The OTO EXPO resembles an ENT Market Square where you, the buyer, can easily compare prices and discuss

purchasing options with qualified sales representatives. It's one-stop shopping for every need of the ENT physician, surgeon, nurse, or hospital administrator. This setting is also ideal for networking with colleagues from other societies, publication firms, pharmaceutical companies, and device manufacturers who have come from around the world to participate in the specialty's premier event.

Following a virtual ribbon-cutting taking place from the stage of the annual meeting's Opening Ceremony, the OTO EXPO will open its doors. Guests will then be led into the OTO EXPO located in Halls A-C of the Walter E. Washington Convention Center. We encourage you to refer to the exhibitor directory in your registration bag and the annual meeting mobile app (available soon) for a complete list of exhibiting companies, maps, contact information, and booth numbers to properly prepare yourself to make the most of your time on the show floor.

For first-time attendees, the OTO EXPO will soon become a can't-miss experience and an invaluable resource.

Returning attendees will find that touring the OTO EXPO can be a time to observe the advances companies have made throughout the years, and ways products and services have improved. All attendees will be able to view any and all of the newest products being made available to otolaryngologists.

## ENT Careers Live!

Employers and job seekers will have an opportunity to participate in ENT Careers Live!, the Academy's employment event, during the annual meeting. It will be located on the show floor in Hall B, Booth 2543. Don't miss out on this valuable networking opportunity. Learn more at [www.healthcareers.com/aaohns](http://www.healthcareers.com/aaohns).

## New: Practice Management Pavilion

A Practice Management Pavilion has been designed to highlight the latest in advanced technologies for healthcare professionals, such as EHR, database management software, business services, and other products and services related to the practice of otolaryngology. This designated area is your one-stop shop for






practice management solutions for your hospital facility or personal practice. It provides an opportunity for quick comparison of company products/services, and will help you maximize your time on the show floor.

### Choose How to Feed Your Hunger

The choice is now yours—box lunch or voucher lunch. Full conference attendees now have two options for lunch in the OTO EXPO. During the registration process, you may select the traditional box lunch option or opt for a \$15 daily meal voucher to be redeemed at any convention center food stand. The concession stands, specializing in Caribbean, Indian, and American cuisine, will be stationed in convenient locations throughout the OTO EXPO.

This is shaping up to be another banner year for the OTO EXPO, and your presence is highly encouraged. Be sure to view the latest list of exhibitors and watch the OTO EXPO floor plan expand on our website. We are looking forward to sharing this exciting experience with you. See you there, September 9-12! 

## AAO-HNSF 2012 Annual Meeting & OTO EXPO Checklist

The annual meeting is fast approaching, and the Academy wants to make sure you're prepared.

Before leaving for Washington, DC, be sure to:

- Book your hotel room through the official annual meeting housing block.
- Go to the Annual Meeting website and create your conference schedule there through the education dropdown option, "view the program."
- Purchase instruction course tickets.
- Review the OTO EXPO map, and choose which exhibitors are of most interest to you.
- Download the Final Program from the annual meeting bookshelf, available at [www.entnet.org/annual\\_meeting](http://www.entnet.org/annual_meeting).
- Make dinner reservations, plan trips to visit monuments, museums, and any other adventures and

excursions you hope to include while visiting Washington, DC.

- Use social media to connect with colleagues and get the latest news prior to and during the meeting.
- Visit [www.entnet.org/annual\\_meeting](http://www.entnet.org/annual_meeting) to read the latest news before, during, and after the meeting.

We look forward to welcoming you to the AAO-HNSF 2012 Annual Meeting & OTO EXPO September 9-12!



Use your smartphone to read this Annual Meeting website quick code.

# Companies Exhibiting at the AAO-HNSF 2012 Annual Meeting & OTO EXPO

(as of July 25, 2012)

20th IFOS World  
Congress Seoul-2013 ..... 1748  
[www.ifosseoul2013.com](http://www.ifosseoul2013.com)

**Acclarent ..... 1107**  
[www.acclarent.com](http://www.acclarent.com)  
IRT Leader

Acumed Instruments  
Corporation ..... 2619  
[www.e-acumed.com](http://www.e-acumed.com)

Advanced Bionics/Phonak ..... 1937  
[www.advancedbionics.com](http://www.advancedbionics.com)

Advanced Endoscopy Devices... 520  
[www.aed.md/](http://www.aed.md/)

**Alcon Laboratories, Inc.... 1607**  
[www.alcon.com](http://www.alcon.com)  
IRT Member

ALK-Abello Inc ..... 522  
[www.prepen.com](http://www.prepen.com)

AllMeds ..... 837  
[www.allmeds.com](http://www.allmeds.com)

Amer Acad of Facial Plastic &  
Reconst Surgery ..... 2507  
[www.aafprs.org](http://www.aafprs.org)

American Board of  
Otolaryngology..... 2331  
[www.aboto.org](http://www.aboto.org)

American Hearing Aid  
Associates ..... 2043  
[www.ahaanet.com](http://www.ahaanet.com)

American Journal of Rhinology &  
Allergy ..... 1816  
[www.AJRA.com](http://www.AJRA.com)

American Medical  
Endoscopy ..... 2509  
[www.endoscopia.com](http://www.endoscopia.com)

American Medical Systems ..... 623  
[www.americanmedicalsystems.com](http://www.americanmedicalsystems.com)

Amplivox ..... 421  
[www.amplivox.us](http://www.amplivox.us)

Annals Publishing Company... 2019  
[www.annals.com](http://www.annals.com)

Anthony Products/Gio Pelle ... 1027  
[www.anthonyproducts.com](http://www.anthonyproducts.com)

Antigen Laboratories, Inc..... 1254  
[www.antigenlab.com](http://www.antigenlab.com)

Apdyne Medical Co ..... 2024  
[www.apdyne.com](http://www.apdyne.com)

Arches Tinnitus Formulas ..... 1012  
[www.tinnitusformula.com](http://www.tinnitusformula.com)

ArthroCare ..... 1506  
[www.arthrocare.com](http://www.arthrocare.com)

ATMOS Inc ..... 1353  
[www.atmosmed.us](http://www.atmosmed.us)

Atos Medical Inc. .... 1749  
[www.atosmedical.com](http://www.atosmedical.com)

Audiology Management  
Group, Inc. .... 2240  
[www.audiologymanagementgroup.com](http://www.audiologymanagementgroup.com)

balanceback ..... 847  
[www.balanceback.com](http://www.balanceback.com)

Bausch + Lomb ..... 2142  
[www.bausch.com](http://www.bausch.com)

Beaver-Visitec International... 2324  
[www.beaver-visitec.com](http://www.beaver-visitec.com)

Beijing Fanxing Guangdian Med  
Treatment Equip..... 1149  
[www.bjfxgd.com.cn](http://www.bjfxgd.com.cn)

Beutlich LP Pharmaceuticals .. 1717  
[www.beutlich.com](http://www.beutlich.com)

Beyondtinnitus.com ..... 2047  
[www.beyondtinnitus.com](http://www.beyondtinnitus.com)

BFW Inc..... 2618  
[www.bfwinc.com](http://www.bfwinc.com)

Bien Air Surgery ..... 2017  
[www.bienair.com](http://www.bienair.com)

Biomet Microfixation ..... 1913  
[www.biometmicrofixation.com](http://www.biometmicrofixation.com)

Blue Tree Publishing Inc ..... 1313  
[www.bluetreepublishing.com](http://www.bluetreepublishing.com)

Boston Medical Products Inc.... 614  
[www.bosmed.com](http://www.bosmed.com)

Brainlab ..... 737  
[www.brainlab.com](http://www.brainlab.com)

Brazilian Association of ENT .... 851  
[www.aborlccf.org.br](http://www.aborlccf.org.br)

Bryan Medical Inc..... 2141  
[www.bryanmedical.net](http://www.bryanmedical.net)

Carestream Health Inc ..... 2429  
[www.carestream.com/ent-allergy](http://www.carestream.com/ent-allergy)

Carl Zeiss Meditec..... 1629  
[www.meditec.zeiss.com](http://www.meditec.zeiss.com)

Carnegie Surgical LLC..... 2323  
[www.carnegiesurgical.com](http://www.carnegiesurgical.com)

CEREDAS ..... 1144  
[www.ceredas.com](http://www.ceredas.com)

ChartLogic Inc ..... 443  
[www.chartlogic.com](http://www.chartlogic.com)

Checkpoint Surgical, LLC..... 523  
[www.checkpointsurgical.com](http://www.checkpointsurgical.com)

CHEER Practice-Based Research  
Network..... 439  
[www.cheerresearch.org](http://www.cheerresearch.org)

Chef's Special and Indian Food  
Carts ..... 325

Cincinnati Children's Hosp Med Ctr  
Division of Human Genetics ... 757  
[www.cincinnatichildrens.org/genetics](http://www.cincinnatichildrens.org/genetics)

ClientTell..... 1842  
[www.clienttell.net](http://www.clienttell.net)

Clinicon Corporation ..... 426  
[www.clinicon.com](http://www.clinicon.com)

Cobalt Medical Supply Inc ..... 2343  
[www.cobaltmed.com](http://www.cobaltmed.com)

Cochlear Americas..... 1007  
[www.cochlear.com](http://www.cochlear.com)

Compulink Business  
Systems, Inc. .... 1742  
[www.compulinkadvantage.com](http://www.compulinkadvantage.com)

ConeScan ..... 2519  
[www.conescan.com](http://www.conescan.com)

Cook Medical ..... 1917  
[www.cookmedical.com](http://www.cookmedical.com)

Covidien..... 2529  
[www.covidien.com/rms/pages.aspx](http://www.covidien.com/rms/pages.aspx)

DEKA Medical Inc..... 423  
[www.dekamedinc.com](http://www.dekamedinc.com)

Dental Sleep Med Systems & The  
Snoring Is Boring Team..... 1844  
[www.getdentalsleep.com](http://www.getdentalsleep.com)

Department of Defense Hearing  
Center of Excellence ..... 440  
[www.hearing.health.mil](http://www.hearing.health.mil)

Designs for Vision Inc ..... 1346  
[www.dvmail.com](http://www.dvmail.com)

Doc's Duds..... 1446  
[www.docsduds.com](http://www.docsduds.com)

Doc's Proplugs Inc8..... 31  
[www.proplugs.com](http://www.proplugs.com)

DocumENT..... 1848  
[www.documENT-emr.com](http://www.documENT-emr.com)

Doximity ..... 1736  
[www.doximity.com](http://www.doximity.com)

Dr. Kim Co..... 422  
[www.dr-kim.net](http://www.dr-kim.net)

Eagle Surgical Products LLC ..... 414  
[www.electrolubesurgical.com](http://www.electrolubesurgical.com)

Ear Nose & Throat Journal..... 748  
[www.entjournal.com](http://www.entjournal.com)

Ecleris ..... 1707  
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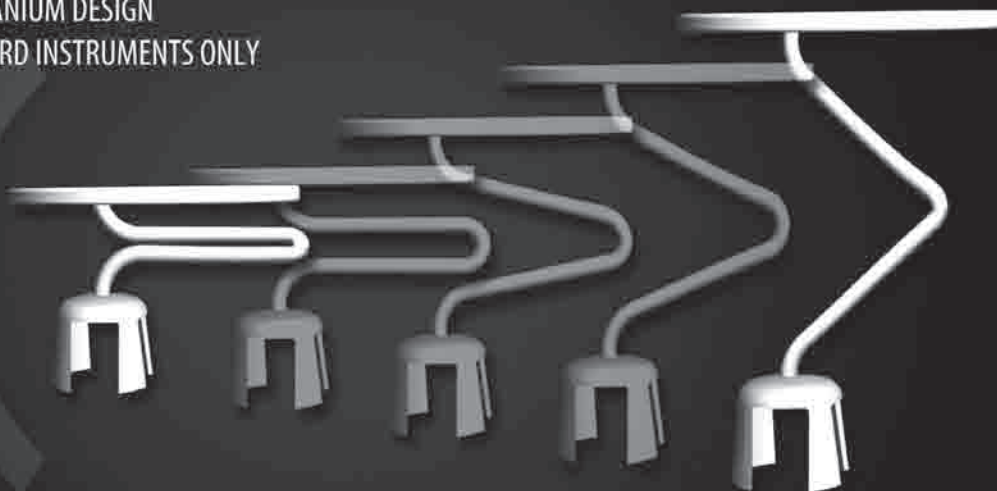
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The satellite functions that occur around the AAO-HNSF 2012 Annual Meeting & OTO EXPO provide attendees with numerous ways to enrich their time in our nation's capital. For the most up-to-date roster of additional networking and educational opportunities, visit our itinerary planner at [www.entnet.org/annual\\_meeting](http://www.entnet.org/annual_meeting) and select "view the program."

### 47th Annual ANS Fall Meeting-ANS Scientific Program; Facial Nerve Study Group; William House Cochlear Implant Study Group; Stereotactic Radiosurgery Study Group

Saturday, September 8, 6:45 am  
Walter E. Washington Convention Center, Room 146A

### ABEA Council Meeting

Saturday, September 8, 4:00 pm,  
Washington Renaissance,  
Meeting Room 5

### AHNS Annual Meeting 115th World Congress IFHNOS-2014

Saturday, September 8, 9:00 am  
Washington Renaissance,  
Meeting Room 11

### American Broncho-Esophagological Association Task Force Meeting

Monday, September 10, 9:00 am  
Washington Renaissance,  
Meeting Room 5

### American Journal of Rhinology & Allergy Editorial Board Meeting

Monday, September 10, 6:30 am  
Washington Renaissance,  
Meeting Room 11

### Annual CSO Board Meeting and Membership Banquet

Saturday, September 8, 5:00 pm  
Henley Park, Eton Room

### ANS Executive Council Meeting-Luncheon, followed by ANS Education Committee Meeting

Friday, September 7, noon  
Washington Renaissance,  
Meeting Room 15

### AOS Council Meeting

Sunday, September 9, 7:30 am  
Walter E. Washington Convention Center, Meeting Room 159A

### ASPO Board and Committee Meetings

Saturday, September 8, 7:00 am  
Washington Renaissance,  
Meeting Room 12

### ASPO Committee Meetings

Saturday, September 8, 7:00 am  
Washington Renaissance,  
Meeting Room 13

### COSM SLC Meeting

Monday, September 10, 7:00 am  
Washington Renaissance,  
Meeting Room 4

### CSO Fellowship Breakfast Meeting

Sunday, September 9, 6:00 am  
Henley Park, Front Parlor

### da Vinci Transoral Surgery-Optimal Therapy Selection in the era of HPV + Oropharyngeal Cancer

Monday, September 10, 5:30 am  
Washington Renaissance, Renaissance Ballroom

### Ear, Nose & Throat Journal Editorial Board Meeting

Sunday, September 9, 6:00 am  
Washington Renaissance,  
Meeting Room 16

### Eustachian Tube Study Group

Sunday, September 9, 7:00 am  
Washington Renaissance,  
Meeting Room 4

### Innovations in the Treatment of Allergic Rhinitis

Monday, September 10, 6:30 pm  
Washington Renaissance,  
Grand Ballroom

### Laryngoscope-Contemporary Review Committee

Tuesday, September 11, 11:30 am  
Washington Renaissance  
Meeting Room 3

### Laryngoscope-How I Did It Committee

Tuesday, September 11, 11:30 am  
Washington Renaissance,  
Meeting Room 4

### Laryngoscope-TRIO BP Committee

Tuesday, September 11, 11:30 am  
Washington Renaissance,  
Meeting Room 5

### Laryngoscope Editors Meeting

Sunday, September 9, 11:30 am  
Washington Renaissance,  
Meeting Room 7

### Neurolaryngology Study Group (American Laryngological Association)

Tuesday, September 11, 7:30 am  
Walter E. Washington Convention Center, Room 150A

### Otology & Neurotology Board of Directors Meeting/Luncheon

Monday, September 10, noon  
Walter E. Washington Convention Center, Meeting Room 159A

### SPAO-HNS CME Membership Meeting

Sunday, September 9, 8:00 am  
Washington Renaissance,  
Meeting Room 5

### The 35th Annual Meeting of the Association of Otolaryngologists of Indian Heritage

Monday, September 10, 7:00 pm  
Rasoi Indian Kitchen; 1810 K Street  
Northwest Washington, DC 20006

### The Laryngoscope Editorial Board Meeting

Monday, September 10, 7:00 am  
Washington Renaissance,  
Congressional A

### Treatment of Advanced Laryngeal Cancer (TALC) Study Investigators Meeting

Sunday, September 9, 7:00 am  
Walter E. Washington Convention Center, Room 140A



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### The Walter E. Washington Convention Center Houses the Largest Public Art Collection in the City

Home to more than 120 works of art, including sculpture, painting, photography, mixed media, and graphics, the Washington Convention Center Authority is the proud owner of the largest public art collection in Washington, DC. With help from the National Gallery of Art, Smithsonian American Art Museum, Corcoran Gallery of Art, Federal Commission of Fine Arts, and DC Commission on the Arts and Humanities, the Convention Center developed a lavish collection valued at more than \$4 million. The collection, which primarily focuses on works from local artists, is a unique feature not found in most convention centers. ([www.dcconvention.com](http://www.dcconvention.com))

### Visitors Flock to the Nation's Capital Annually

- DC welcomes about 17 million visitors each year, generating an estimated \$5.7 billion in visitor spending for the city alone.
- In 2011, DC hosted 808 conventions, meetings, and tradeshows, including 48 at the Walter E. Washington Convention Center. These meetings attracted more than 1 million attendees.
- About 1.7 million international visitors come to DC annually. Top countries of origin: United Kingdom, Germany, Australia, China, Italy, Brazil, Japan, South Korea, and the Netherlands.

### Top Attractions

- National Air & Space Museum (7 million visitors)
- National Museum of Natural History (6.6 million visitors)
- Lincoln Memorial (5.4 million visitors)
- National Museum of American History (4.6 million visitors)
- World War II Memorial (4 million visitors)
- Vietnam Veterans Memorial (3.8 million visitors)



Thomas Jefferson Memorial



- Korean War Veterans Memorial (2.9 million visitors)
- FDR Memorial (2.3 million visitors)
- Rock Creek Park (2 million visitors)
- Thomas Jefferson Memorial (1.9 million visitors)
- National Zoological Park (1.9 million visitors)

### Restaurants

- There are more than 100 restaurants located in downtown Washington, DC, not including fast food, delis, and take out.
- Forty restaurants in the metropolitan region received Zagat scores of 25 or higher (out of 30).

- Called "one of the most exciting restaurant cities on the East Coast" by *Travel + Leisure*, DC's culinary distinctions include James Beard award-winning chefs, AAA Five Diamond ratings, and restaurants included on Esquire's list of the "Best New Restaurants in America."
- More than 90 DC restaurants offer private dining space, including 10 within a few blocks of the convention center. Another 26 restaurants with private dining space are located within 1.5 miles of the convention center. [b](#)

### Learn More Online

(Exclusive) About the Green Initiatives Adopted in Washington, DC, and more.

visit <http://goo.gl/HbeoY>

## Join Us at the Otolaryngology Historical Society Meeting

On behalf of **Marc R. Eisen, MD, PhD**, this is a cordial invitation to Academy members to attend the Otolaryngology Historical Society (OHS) meeting, Monday, September 10, from 6:30 pm to 8:30 pm at the Cosmos Club, Crentz Room, 2121 Massachusetts Avenue Northwest, Washington, DC. Transportation will be provided at 6:00 pm from the Walter E. Washington Convention Center.

The program features the highly regarded appraiser of historical artifacts, Allan J. Stypeck, Jr., whose clients include the White House, the



The Cosmos Club

U.S. National Archives and Records Administration, the U.S. Department of State, and other famous Washington, DC, institutions. His talk is entitled “Collecting Books and Manuscripts in the 21st Century—Is There a Future?”

Other presenters:

- **Eduardo C. Corales, MD**, Stanford University: “How Cranial Nerve Numbering Led to Widespread Inaccuracies in Modern Anatomical Illustrations.”
- **Robert K. Jackler, MD**, Stanford University: “Revisiting Max Brödel’s 1939 Classic Coronal Illustration of the Ear.”
- **Andrew G. Shuman, MD**, Memorial Sloan Kettering Cancer Center: “From Cancer to Cookbooks: The Story of Clementine Paddleford.”

To celebrate the legacy of pioneering specialists, OHS members are encouraged to attend and bring guests to this delightful and elegant occasion.



**Robert J. Ruben, MD**, a member of the Cosmos Club, notes that the club was the site for discussions that led to the formation of the National Institute on Deafness and other Communications Disorders (NIDCD) 25 years ago.

To make a reservation for the OHS meeting, email [ohs@entnet.org](mailto:ohs@entnet.org). To join the OHS as a member, email [memberservices@entnet.org](mailto:memberservices@entnet.org). [b](#)

## ENT Careers Live! Coming to the AAO-HNSF 2012 Annual Meeting & OTO EXPO

Looking to hire? In search of a job? ENT Careers Live! will be at the 2012 Annual Meeting & OTO EXPO in Washington, DC, in booth 2543 at Hall B in the Convention Center. Staff will be available to help attendees and answer questions about the services provided by the online job board, ENT Careers.

This is a valuable networking opportunity for job seekers and employers who will be together in the same city at the world’s largest gathering of otolaryngologists. Event Connection is the key to making the most of ENT Careers Live! at the annual meeting. It allows employers to flag their job postings to indicate that they will be attending the annual meeting with details of how and where job seekers can contact them for an interview during the event. ENT Careers Live! staff can walk you through the Event Connection process at booth 2543 or you can get started now by visiting [www.healthcareers.com/aaohns/healthcare-events/](http://www.healthcareers.com/aaohns/healthcare-events/).

As always, job seekers pay no fee to use ENT Careers, including uploading a resume and applying for jobs online. Register your job seeker profile on the career center at [www.healthcareers.com/aaohns](http://www.healthcareers.com/aaohns) to gain access to the entire collection of online career resources provided to you by ENT Careers. Once you have registered, you can apply for jobs, manage your job search history, upload up to six different versions of your resume, and sign up for Job Alerts.

For hiring organizations, the staff at the ENT Careers booth can post your jobs onsite, or you can call us at 1-888-884-8242 to get your jobs posted at any time of the year. Job postings are competitively priced, giving you direct access to qualified otolaryngology candidates including AAO-HNS members and other otolaryngology physician job seekers.

The ENT Careers Live! booth will be equipped with computers and a printer



during the annual meeting for your convenience. Interview areas will be available on a first-come, first-served basis. The booth will be open throughout the OTO EXPO so guests may take as much time as needed.

ENT Careers is brought to you by HEALTHCAREERS Network, an Academy Advantage Premier Partner.

# CALL FOR PAPERS



## TRIOLOGICAL SOCIETY



### **Combined Sections Meeting**

January 24-26, 2013  
Westin Kierland Resort  
Scottsdale, AZ



### **116th Annual Meeting at COSM**

April 10-14, 2013  
JW Marriott Grande Lakes  
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**Section Meeting Abstract Deadline**  
**August 1, 2012**

**Annual Meeting Abstract Deadline**  
**October 15, 2012**

**All Abstracts Must Be Submitted On-Line**  
**[www.triological.org](http://www.triological.org)**

All abstracts accepted for oral or poster presentation are the property of the Triological Society. Manuscript submission to the Triological Society's journal, *The Laryngoscope*, is required prior to oral presentation.

The material in all abstracts may not be submitted for publication, published or presented previously at another national or international meeting and may not be under consideration for presentation at another national or international meeting. The penalty for duplicate presentation/publication will prohibit all authors from presenting at a Triological Society meeting or at COSM for three years.

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## In the Political Hub of Our Nation, Advocacy Activities Await!

### Advocacy Opportunities during the Meeting

It is a legislative and political affairs homecoming during the AAO-HNSF 2012 Annual Meeting & OTO EXPO! With this year's meeting in Washington, DC, AAO-HNS members are provided the perfect opportunity to become more involved in advocacy-related events scheduled during the meeting.

As in past years, the ENT PAC Booth will serve as the Government Affairs "hub" for the meeting. AAO-HNS members are encouraged to stop by the booth to learn more about easy ways to support the Academy's various legislative, political, and grassroots advocacy programs. The booth will be located in the convention center on the L Street Bridge.

Visit the booth to:

- Obtain information on becoming a 2012 ENT PAC Investor;
- Sign our petition to Congress on a key AAO-HNS legislative issue;
- View the renowned ENT PAC 2012 "Wall of Investors;"
- Receive copies of the latest edition of the ENT PAC "Investors Report;"
- Join the ENT Advocacy Network to receive timely updates on political and legislative issues affecting the specialty and a free subscription to a biweekly e-Newsletter, *The ENT Advocate*;
- Receive the latest updates on federal and state legislation affecting your practices and your patients;
- Learn ways to effectively advocate on behalf of the specialty when you return home.


### Exclusive Events for ENT PAC Investors during Annual Meeting

ENT PAC, the political action committee of the AAO-HNS, financially supports incumbent Members of Congress and viable candidates regardless of their party affiliation who champion the specialty's legislative

priorities. To that end, it is important to achieve diverse and widespread support from AAO-HNS members across the country. In order to better educate ENT PAC Investors and eligible supporters about the importance of the PAC, the ENT PAC Board of Advisors and staff have scheduled various events during the annual meeting to share critical information with PAC Investors. The events scheduled for 2012 include:

- The annual ENT PAC Investors "thank-you" reception. This popular event will take place on Monday, September 10. U.S. AAO-HNS members who make donations to ENT PAC prior to or during the annual meeting are invited to the event.
- An inaugural "Residents Briefing," on Tuesday, September 11. As the future of the specialty, now is the time for residents to learn about the Academy's various political and legislative programs. Residents will receive an "insider's" update on current federal legislative activities, upcoming elections, and new PAC programs. Residents can expect an exciting, yet casual, discussion outlining the politics and policy fueling efforts on Capitol Hill.
- A special "thank-you" luncheon for members of the ENT PAC Chairman's Club (\$1,000+ donors). The luncheon, hosted by members of the ENT PAC Board of Advisors, is a unique opportunity to learn about

the Academy's political strategy and decision-making process. The luncheon will take place on Tuesday, September 11.

Mark your calendars today to attend these special events! For more information on becoming an ENT PAC Investor, visit [www.entnet.org/entpac](http://www.entnet.org/entpac) (U.S. AAO-HNS member log-in required) or email ENT PAC staff at [entpac@entnet.org](mailto:entpac@entnet.org). 

*\*Contributions to ENT PAC are not deductible as charitable contributions for federal income tax purposes. Contributions are voluntary, and all members of the American Academy of Otolaryngology—Head and Neck Surgery have the right to refuse to contribute without reprisal. Federal law prohibits ENT PAC from accepting contributions from foreign nationals. By law, if your contributions are made using a personal check or credit card, ENT PAC may use your contribution only to support candidates in federal elections. All corporate contributions to ENT PAC will be used for educational and administrative fees of ENT PAC, and other activities permissible under federal law. Federal law requires ENT PAC to use its best efforts to collect and report the name, mailing address, occupation, and the name of the employer of individuals whose contributions exceed \$200 in a calendar year.*

### Stay Informed with the AAO-HNS Legislative and Political Affairs Webpage

Do you want to be one of the first to know the status of healthcare bills moving through Congress or your state? Bookmark the Legislative and Political Affairs webpage today! By visiting the webpage, you can learn more about the issues affecting the specialty, including the flawed Sustainable Growth Rate (SGR) formula, medical liability reform, scope-of-practice battles, Graduate Medical Education (GME) funding, truth-in-advertising initiatives, and efforts to repeal the Independent Payment Advisory Board (IPAB). Visit [www.entnet.org/advocacy](http://www.entnet.org/advocacy).



# Partners for Progress

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As of June 14, 2012

## 3P Update: Quality and Resource Use Reports and the Value-Based Payment Modifier Program

**T**he Physician Payment Policy Workgroup (3P), co-chaired by **Richard W. Waguespack, MD**, and **Michael Setzen, MD**, is the senior advisory body to Academy leadership and staff on issues related to socioeconomic advocacy, regulatory activity, coding or reimbursement, and practice services or management. The Health Policy staff and 3P have been busy during the first half of 2012 with a continued high level of activity, constant emails and monthly calls, working diligently and tirelessly on behalf of all members. 3P has focused on the development of future payment mechanisms and two programs the Centers for Medicare and Medicaid Services (CMS) are working on, the distribution of Quality Resource Use Reports (QRURs), and the installation of the value-based payment modifier program.

By way of background, the Medicare Improvements for Patients and Providers Act of 2008 created the Physician Resource Use Measurement and Reporting Program. In 2010, the Affordable Care Act extended and enhanced the program and named it the Physician Feedback Program. The program authorizes CMS to produce annual physician QRURs. The Affordable Care Act also authorized the creation of the value-based payment modifier program, which requires the use of differential payments to physicians or groups based upon the quality of care furnished compared with cost.

### QRURs

In early March 2012, CMS sent the first QRURs to nearly 24,000 physicians in Iowa, Kansas, Missouri, and Nebraska. Data contained in QRURs compared the cost and clinical care provided to Medicare beneficiaries in 2010 by a physician to the average costs and clinical care of other physicians in these four states. These reports contained

the number of Medicare beneficiaries a physician saw during the reporting period, compared the quality of care for Medicare beneficiaries seen by a physician to other physicians based upon 28 quality measures (27 of which are National Quality Forum endorsed), and showed cost data for patients whose care the physician directed, influenced, or contributed to. This was measured by outpatient evaluation and management (E&M) office visits or total professional costs.

Wisconsin Physician Services (WPS), the Medicare contractor that processes claims in the four states, emailed QRURs to one physician or employee who has been designated as the primary contact for communications from WPS. The reports were available until the first week of June. These reports, according to CMS, are intended to be informational and allow physicians to compare the quality and cost of Medicare patients' care to physicians in their specialty and by all physicians within those states. Although they are currently informational in nature only, the reports also provided quality of care and cost information that will be used by CMS in the development of the value-based payment modifier program, which will begin to be phased in starting in 2015.


### Value-Based Payment Modifier Program

The Affordable Care Act created the value-based payment modifier program and required the use of differential payments to physicians or groups based upon the quality of care furnished compared with cost and will apply to services physicians' bill under the Medicare Physician Fee Schedule. Through the program, CMS will make adjustments in cost for difference in geographic rates (payment standardization) and the underlying health status of individual

beneficiaries seen by a provider (risk adjustment).

Although the Value-Based Modifier will not take effect until 2015, the 2015 modifier will be based upon services provided during 2013. For 2015 and 2016, the U.S. Secretary of Health and Human Services has discretion to apply the modifier to specific physicians and/or groups of physicians they deem appropriate. In 2017, the modifier will apply to most or all physicians who submit claims through the Medicare Physician Fee Schedule. Few specifics are currently known about the program, but CMS plans on proposing methodology for the value-based modifier program during the 2013 Physician Fee Schedule rulemaking process.

CMS is soliciting input from associations, including the Academy, in the development of the methodology for the modifier, and the Academy will provide input to CMS through comments and coalitions as necessary. The Academy is asking members who received and downloaded QRURs to notify the health policy unit and provide input so we can forward concerns from members to CMS officials. For example, are the performance highlights important or are there others that may be more useful? Please email feedback to [healthpolicy@entnet.org](mailto:healthpolicy@entnet.org).

At this year's annual meeting in Washington, DC, 3P will conduct a miniseminar on Academy Advocacy for Physician Payment: 2012 on Sunday, September 9, 2012, from 10:30 am to 11:50 am. One of the future payment strategies that will be discussed during the miniseminar is the value-based payment modifier program that will likely incorporate aspects from the initial QRURs. In the meantime, please monitor our Medicare Updates page, which can be accessed at <http://www.entnet.org/Practice/Medicareupdates.cfm>, for updates on these programs. 



# Medicare Reimbursement: How the AMA Relative Value Update Committee (RUC) Works and Who Is Involved

By *Jane T. Dillon, MD,*  
with *Jenna W. Minton, Esq.*  
AAO-HNS Staff, Health Policy

As an Academy member, you've probably seen frequent requests distributed in the e-News asking for volunteers for upcoming AMA Relative Value Update Committee (RUC) surveys of physician services. Many of you may have asked yourself what the RUC is and why the surveys are important. By providing the membership with some general background on this important process, we hope to encourage you to become an active participant in the annual RUC survey process.

The AMA RUC was developed in response to the transition to a physician payment system based on the Resource-Based Relative Value Scale (RBRVS). The RUC is a multispecialty committee that provides clinical expertise and input on the resources required to provide physician services. The RUC submits recommendations to the Centers for Medicare and Medicaid Services (CMS) on an annual basis, which are used by CMS to develop relative values for physician services provided to Medicare beneficiaries. The RUC, in conjunction with the Current Procedural Terminology (CPT) Editorial Panel, has created a process where specialty societies can develop relative value recommendations for new and revised codes, and the RUC carefully reviews survey data presented by specialty societies to develop recommendations for consideration by CMS. CMS then issues final payment policies and values in the final Medicare Physician Fee Schedule rule, which is typically released in early November each year.

The RUC is intended to represent the entire medical profession. Of its 31 members, 21 are appointed by major national medical specialty societies, including those recognized by the American Board of Medical Specialties; those with a large percentage of physicians in patient care;

and those that account for high percentages of Medicare expenditures. Four seats rotate on a two-year basis, with two reserved for an internal medicine subspecialty, one for a primary care representative, and one for any other specialty. The RUC chair, the co-chair of the RUC Health Care Professionals Advisory Committee Review Board, and representatives of the AMA, American Osteopathic Association, the chair of the Practice Expense Review Committee, and chair CPT Editorial Panel hold the remaining six seats. The AMA Board of Trustees selects the RUC chair and the AMA representative to the RUC. The individual RUC members are nominated by the specialty societies and are approved by the AMA.

The RUC currently includes the seats mentioned above and a representative and alternates for the following medical specialties: anesthesiology, cardiology, dermatology, emergency medicine, family medicine, general surgery, geriatrics, internal medicine, neurology, neurosurgery, obstetrics/gynecology, ophthalmology, orthopaedic surgery, otolaryngology, pathology, pediatrics, plastic surgery, primary care (rotating seat), pulmonary medicine (rotating seat), psychiatry, radiology, rheumatology (rotating seat), thoracic surgery, urology, and vascular surgery (rotating seat).

The Academy actively participates in the RUC process and surveys codes for nearly every RUC meeting. Meetings take place three times a year during the winter, spring, and fall. The Academy's current RUC representatives include RUC panel member **Charles F. Koopmann, MD**, and panel member alternate, **Jane T. Dillon, MD**. It is important to recognize that the RUC representatives for each specialty are not advocates for their specialty; rather they participate in an individual capacity and represent their own views and independent judgment while serving on the panel. The Academy also has RUC Advisors who are responsible for working with the Physician Payment Policy

Workgroup (3P) and Academy staff to develop relative value recommendations and practice expense direct inputs for otolaryngology services that are presented to the RUC. The Academy RUC advisors are **Wayne M. Koch, MD**, and advisor alternate **John T. Lanza, MD**.

As part of the Academy's participation in the RUC, we often ask members to participate in surveys to help value CPT codes. The RUC team, outlined above, uses those survey responses to develop the recommendations for values and practice expenses that are presented to the RUC. The RUC hears presentations from all specialties interested in the service being reviewed and determines whether they agree with the proposed values, or whether the code needs further review. In the event the RUC does not agree with the value presented by the society, the code is sent to a facilitation committee to try to reach agreement on the most appropriate value for the service. Familiarity with the survey instrument and methodology is essential for accurate completion of a survey, which has important implications for Medicare reimbursement. Survey instruments are standardized across all specialties and random member samples are used to derive data for presentation to the RUC. In order to participate, respondents must be American physicians who are familiar with the service under review. Respondents must have supervised or performed the code being surveyed at least once during the past 12 months to complete a survey.

For more background on the RUC Survey Process, members can access the following PowerPoint presentation on the AcademyU® website, located under Practice Management: [www.entnet.org/educationandresearch/academyu.cfm](http://www.entnet.org/educationandresearch/academyu.cfm). Members can also email any questions to [healthpolicy@entnet.org](mailto:healthpolicy@entnet.org). We hope this background is useful to members in better understanding the composition of the RUC as well as the importance of the

## Academy Piloting Patient Safety Portal

**Rahul K. Shah, MD**

*Co-chair, AAO-HNSF PSQI Committee  
George Washington University School  
of Medicine*

For the past two years, the Academy, under the direction of Jean Brereton, senior director of Research, Quality, and Health Policy, and with Peter Robertson, senior manager of Research and Quality Improvement, has been exploring the feasibility of having our membership anonymously report patient safety-related issues, such as errors, adverse events, and near misses. The concept behind this is similar to what the Federal Aviation Administration (FAA) does to keep track of near misses and similar events. The nonpunitive reporting system the FAA has is so robust that many consider it one of the reasons for that agency's exemplary safety record.

The federal designation as a patient safety organization as authorized by the Patient Safety and Quality Act of 2005 denotes certain protections to organizations in collecting such data and using this information in a nonpunitive manner. Our hope was that becoming a patient safety organization would be in the best interest of our members and their patients. However, after many months and extensive research into a number


of options, including potentially partnering with an existing Patient Safety Organization, we have decided this is not the route to pursue.

We need information on patient safety events to be able to take a macro-level view of the zones of risk in our practices and help aggregate our one-off occurrences into meaningful actionable data. The difficulty is that a problem experienced by one otolaryngologist in a specific region of the country may not even be known to another practitioner in a different practice region. The need to have information on these rare, but significant, events reach the broadest possible targeted audience is imperative.

As such, the Academy, in conjunction with the Patient Safety Quality Improvement Committee, is piloting a patient safety portal where Academy members can securely, confidentially, and anonymously report an event. The reported error does not necessarily have to have resulted in an adverse event; reports can essentially reflect any safety concern that the Academy member has noted, including a near miss or other such error. Academy staff has gone to great lengths to ensure and corroborate the two most important aspects of a nonpunitive report system: confidentiality and anonymity.

The initial step is to ensure users of the portal are Academy members. Once your membership is confirmed and you access the patient safety portal, your report immediately becomes anonymous. Indeed, we have run checks to ensure that no data are recorded, not even the IP address of the computer from which the report is submitted. As a final security check, as reports come in, they will be reviewed by a nonphysician Academy staff member to ensure that any report containing any type of identifying information is purged.


Our hope is to create a place where Academy members can and should be able to report near misses, adverse events, and errors. The hope is that as our membership starts using this reporting tool, we will be able to rapidly identify macro trends that are becoming an issue. For example, if there are infrequent, but significant, issues associated with a particular device, the reporting system may be able to catch this. To be clear, the patient safety portal is not to be duplicative of existing reporting systems such as the U.S. Food & Drug Administration's mandatory reporting system for device issues. Rather, it is to be complementary and immediately available and accessible for our Academy membership, with the ability to improve our practices and the safety for our patients and our specialty.

We are currently piloting this with the Patient Safety and Quality Improvement Committee to discern if the portal asks the right questions that can lead to collection of actionable data. We hope to refine this portal soon and then begin opening this up to all members, so that we can identify opportunities for improvement of our systems of practice based on the aggregate data. 

*We encourage members to write us with any topic of interest and we will try to research and discuss the issue. Members' names are published only after they have been contacted directly by Academy staff and have given consent to the use of their names. Please email the Academy at [qualityimprovement@entnet.org](mailto:qualityimprovement@entnet.org) to engage us in a patient safety and quality discussion that is pertinent to your practice.*

## Evidence-Based Guidelines Affecting Policy, Practice, and Stakeholders (E-GAPPS) Conference

The 2012 E-GAPPS Conference is a two-day meeting co-sponsored by the Guidelines International Network North America (G-I-N NA) and the Section on Evidence-Based Health Care (SEBHC) of the New York Academy of Medicine. It will take place Monday, December 10, through Tuesday, December 11, in New York, NY. The E-GAPPS mission focuses on constructive dialogue and collaboration; best practices in guideline development, dissemination, and implementation; and perspectives, processes, values, and principles that influence healthcare policy.

To register to attend, or to learn more about the confirmed plenary speakers, conference themes, or breakout sessions, visit <http://www.nyam.org/events/2012/evidence-based-guidelines-conference.html>. 



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# United Healthcare Private Payer Advocacy Update


On April 25, 2012, AAO-HNS representatives, including physician and audiology volunteers and staff, conducted a conference call with UnitedHealthcare (UHC) and hi HealthInnovations (HHI) executives as a follow-up to our January in-person meeting and February 21 letter regarding the direct-to-consumer hearing aid program (see the Private Payer website for more: [www.entnet.org/Practice/News-and-Updates-from-Private-Payers.cfm](http://www.entnet.org/Practice/News-and-Updates-from-Private-Payers.cfm)). A day earlier, the Academy's government affairs team spoke with HHI's legal counsel regarding potential regulatory and statutory issues with the program. The AAO-HNS and numerous other hearing health organizations have expressed serious concerns regarding the company's online hearing test. During the call, HHI confirmed it had removed the self-rendered online hearing test from the company's website. However, HHI continues to distribute air conduction tests to providers. HHI has not made any changes to its program based on our feedback, so the Academy believes it is unlikely anything will change quickly. As a result, we made our position clear in our discussion with UHC and HHI that while we are supportive of providing patients access to affordable hearing aids, we do not believe the program represents safe and high quality care for patients. AAO-HNS staff also had a conference call on April 26 with counterparts at the American Academy of Audiology (AAA), the American Speech-Language Hearing Association (ASHA), the Academy of Doctors of Audiology (ADA), and the International Hearing Society (IHS) during which each organization discussed its recent interactions with UHC on this issue.

On May 15, the Academy signed on to a letter urging state health departments to advise consumers experiencing hearing loss to seek a comprehensive hearing evaluation by a licensed hearing professional prior to purchasing hearing

aids over-the-counter or through the Internet. The letter additionally urges each department of health to notify consumers of the importance of seeing a physician for hearing loss and that failure to do so skirts state and federal regulations and could potentially be harmful. The letter, which was signed by numerous other organizations, including the ADA, AAA, ASHA, and IHS, was sent to the departments of health in all 50 states and six unincorporated U.S. territories. The goal of the effort was for all states to issue a statement similar to the Minnesota Department of Health's as part of May's Better Hearing and Speech month. The statements were to stress the importance of seeing a hearing healthcare

professional for hearing loss. To view the Minnesota Department of Health's news release, view its website at [www.health.state.mn.us/news/pressrel/2011/hearing102611.html](http://www.health.state.mn.us/news/pressrel/2011/hearing102611.html).

In addition, on June 25, the Academy communicated our concerns in a letter to the U.S. Food and Drug Administration (FDA), in an attempt to warn consumers at the federal level of risks associated with direct-to-consumer hearing aid programs. Stay tuned to the Academy website for further updates.

If you or any of your patients are experiencing issues with UHC's hearing aids or air conduction hearing kits, email the Academy's Health Policy team at [healthpolicy@entnet.org](mailto:healthpolicy@entnet.org). 

## Advocacy-Effort Timeline

**October 3, 2011**—Academy is alerted of hi HealthInnovations' new hearing aid program.

**October 24, 2011**—Academy comments about the program in American Medical News.

**November 2, 2011**—Comment letter sent to UHC followed by an immediate response from UHC to arrange a conference call.

**November 28, 2011**—Several members from the Academy's physician payment policy group (3P), Board of Governors chair, and staff conduct a brief conference call with UHC. All parties agree a face-to-face meeting is necessary.

**December 5, 2011**—Academy follows up with UHC, sending a summary of the conference call and suggesting potential dates for a meeting.

**January 30, 2012**—Academy leadership, physician and audiologist volunteers, and staff meet with UHC.

**February 9, 2012**—Academy signs on to a joint statement emphasizing patient safety with four other associations.


**February 21, 2012**—Academy follows up with a letter to UHC reaffirming Academy requests made during the January 30 meeting.

**April 24, 2012**—Government Affairs staff speak with UHC counsel to discuss regulatory and statutory issues.

**April 25, 2012**—Academy leadership, physician and audiologist volunteers, and staff participate in a conference call with UHC as a follow-up to the February 21 letter.

**April 26, 2012**—Academy staff participates in conference call with four other organizations concerned with UHC's hearing aid program.

**May 15, 2012**—Academy signs on to letter urging state health departments in all 50 states and six unincorporated U.S. territories to warn consumers about potential health risks of UHC hearing aid [36.1] programs.

**June 25, 2012**—Academy sends a letter to the FDA communicating concerns about consumer safety of DTC hearing aid programs. 



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# Medical Students, Residents Benefit from Foundation Education Opportunities

**Sonya M. Malekzadeh, MD**  
**AAO-HNSF Coordinator, Education**  
**and Stacey L. Ishman, MD, MPH,**  
**AAO-HNS BOG Leg. Rep. Co-Chair**

The AAO-HNS Foundation's Professional Education program is designed to improve healthcare provider competence through lifelong learning. Primary audiences for our education initiatives are physicians and physicians-in-training who specialize in otolaryngology-head and neck surgery. The Foundation recognizes that these groups have diverse areas of interest and therefore strives to develop resources that recognize these differences. In this article we share the Foundation's education opportunities that have been developed specifically for medical students and residents to assist with their training and improve their competence in the specialty.

As medical students gather knowledge about the medical specialties, the Foundation aims to offer resources that introduce them to the exciting field of otolaryngology-head and neck surgery. For residents who have chosen otolaryngology as their primary specialty, the Foundation provides education materials to support the successful completion of their training program and advancement to practicing otolaryngologists.

## Medical Students

The third edition of *Primary Care Otolaryngology* was published as an e-book in summer 2011. This longstanding Foundation resource continues to be a useful tool for medical students who wish to learn more about common ENT conditions they may face in practice. It is an excellent overview of the otolaryngology field. The Foundation has three additional e-books covering geriatric otolaryngology, antimicrobial therapy, and TNM staging of the head and neck.

Clinical Otolaryngology Online (COOL) courses offer online interactive patient case scenarios designed to help

medical students and residents evaluate otolaryngology-related conditions and apply knowledge to real world situations. They are designed to identify common treatment errors and how to avoid making a clinical mistake or to teach new methods of treatment to improve patient care.

## Residents

Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) has been updated and re-released. This teaching tool provides discussion questions for more than 100 major otolaryngology topics. COCLIA is designed as a teaching conference, and residents are encouraged to review the questions and learn from each other. This version has been enhanced with images and photos.

The perennial Home Study Course (HSC) is a highly valued resource for residents. Each year more than 100 residency programs subscribe to HSC. Most programs require participation in the course and utilize the test scores in the assessment of residents. With multiple subspecialty topics covered each year, a resident gains a comprehensive understanding of the prominent literature in the subspecialties within otolaryngology.

The Academic Bowl is an entertaining session during the AAO-HNSF Annual Meeting & OTO EXPO. Four teams of otolaryngology residents compete to answer clinical questions. Its purpose is to test the clinical prowess of top otolaryngology residents in the country. The audience participates and responds through an audience response system.

AcademyU® provides courses on multiple ENT topics that are of great value to residents. It is composed of courses designed by content experts through the Foundation education committees. In addition, an online lectures series, containing the highlights from the annual meeting, has now been added.

*Otolaryngology-Head and Neck Surgery* is the official journal of the

Foundation and presents peer-reviewed articles on recent developments in treatment of the ear, nose, throat, and related structures of the head and neck. It is available online and in print and features a monthly podcast.

*Patient Management Perspectives* in Otolaryngology (PMP), formerly known as Patient of the Month, is an interactive electronic or print series that simulates real-life clinical decision-making. Each issue includes a clinical case study, visual materials, detailed patient management

## Medical Student, Resident Resources

### Education Opportunities for Members

[www.entnet.org/educationandresearch](http://www.entnet.org/educationandresearch)

### Primary Care Otolaryngology

[www.entnet.org/primarycare](http://www.entnet.org/primarycare)

### Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA)

[www.entnet.org/coclia](http://www.entnet.org/coclia)

### Home Study Course (HSC)

[www.entnet.org/hsc](http://www.entnet.org/hsc)

### Clinical Otolaryngology Online Courses (COOL)

[www.entnet.org/cool](http://www.entnet.org/cool)

### AcademyU®

[www.entnet.org/academyu](http://www.entnet.org/academyu)

### Patient Management Perspectives in Otolaryngology (PMP)

[www.entnet.org/pmp](http://www.entnet.org/pmp)

### Otolaryngology-Head and Neck Surgery Journal

<http://otojournal.org>



summary, references for future study, and a self-assessment.

### Education Resources in the Works

While we are pleased with the quality education resources currently available for medical students and residents, we are not resting on our laurels. We are now developing new products and services for these special audiences.


The Foundation is currently working on a medical student curriculum. The first phase of this is geared toward integrating otolaryngology education into nonotolaryngology rotations and creating a set of evidence-based topics that every medical student should know prior to graduation. The second phase will focus on the education of medical students participating in otolaryngology rotations both at the elective and sub-internship levels.

The new *Resident Manual of Trauma to the Face, Head, and Neck* is being developed by the Trauma Committee. Scheduled to be published this year, it will offer a simple, concise, and easily accessible source of diagnostic and therapeutic guidelines. The manual is intended to be

a quick-reference tool in the evaluation of trauma patients.

In addition, the Foundation education committees are developing a question bank to be used for test preparation and knowledge self-assessment. The bank will make available 400 questions to residents and practicing physicians and is expected to be available as a mobile application this year.

An update to the longstanding *Maintenance Manual for Lifelong Learning* is underway. The primary goal of the manual is to address issues that are of practical importance for otolaryngologists in improving patient care. Intended for residents and practicing physicians, the study guide also includes a self-assessment section.

The Foundation is currently developing an online digital video demonstrating a thorough ENT exam. The target audience for the video is medical students, residents, and allied health professionals. The video includes many images of normal anatomy, normal variances, and common abnormalities. The video covers four areas: the ear, the oral cavity and neck, the face and nose, and the nasopharynx and larynx. 

## Resident and Medical Student Opportunities at the Annual Meeting

- Discounted registration fees
- First-time attendees orientation
- Section for Residents and Fellows-in-Training General Assembly
- Residents Day Monday, September 10
- Free Admission to Instruction Courses for Academy members only
- Tuesday Miniseminars for Residents and Fellows

For complete annual meeting information, visit [www.entnet.org/annual\\_meeting](http://www.entnet.org/annual_meeting)

## Operation Restore Hope: Cebu, Philippines

**Matt A. Wilson, MD**

**O**peration Restore Hope (ORH) is an Australian-based organization dedicated to the operative management of children with craniofacial deformities. Since 1992, ORH has been active in restoring both form and function to underserved patients, especially children with cleft lip and palate deformities. To learn more, visit [www.operationrestorehope.org](http://www.operationrestorehope.org).

In February, our team went to Cebu, Philippines. We had a diverse group consisting of surgeons from the United States, including **Harlan R. Muntz, MD; Robin A. Dyleski, MD; Craig W. Senders, MD**; scrub techs from Cebu; nurses; and an anesthesiologist from Australia. The Rotary Club of Cebu hosted us and organized the transportation and housing of patients and their families.


We operated on 76 patients, mostly with cleft lip and palate deformities, in four days. Resources were limited to items that could be shipped from Australia and the United States. We had one small operating room with four tables running simultaneously, and a storage room was used for recovery.

This was a rewarding experience that I would recommend to anyone thinking about going on a medical mission. I am amazed at how much we could accomplish with such limited resources, but saddened that we could not help more. It was heartbreaking to send away a child with a craniofacial mass due to lack of resources. Fortunately, the Rotary Club was able to get him services at a private hospital.

I would like to thank my supervising physician, Dr. Muntz, for the invitation



Matt Wilson, MD, with a post-op patient.

and the AAO-HNSF Humanitarian Efforts Committee and the Alcon Foundation for sponsoring my trip. 

## More Than Just EAR Surgery

*Patrick C. Walz, MD*

The week of February 18-26, I had the opportunity to travel with Project EAR to the Dominican Republic with **Edward E. Dodson, MD**, and **Eugene G. Chio, MD**, both from Ohio State University, and **Krishna G. Patel, MD, PhD**, from the Medical University of South Carolina.

Project EAR is an ongoing humanitarian effort founded by Dr. Dodson and **Paul R. Lambert, MD**, to help the poor and underserved in developing countries that suffer from hearing loss, ear disease, and other diseases of the head and neck. This is accomplished through medical, surgical, and audiological outreach missions combined with training of local physicians and medical personnel and patient education.

On this mission, we traveled to the Hospital Elias Santana, a mission hospital in Los Alcarizos barrio just outside Santo Domingo. While there, our team worked with **Roberto Batista Genao, MD**, a local otolaryngologist and long-time Project EAR collaborator. We performed 45 procedures.

While the bulk of Project EAR's initial work was hearing-related with audiologic evaluations and ear surgery, the project's mission has expanded to include the gamut of otolaryngology-head and neck surgery. During this most recent trip, we performed thyroidectomies for recalcitrant Graves' disease, parotidectomy for an enlarging parotid mass in a pediatric patient, tympanoplasty and mastoidectomy, microtia repair, and adenotonsillectomy.

Equipped with a single headlight for four operating rooms and suction machines generating negative pressure similar to that of a drinking straw, we were faced with new challenges that encouraged ingenuity and resourcefulness. My experiences in the Dominican Republic are tangible reminders of the reasons I was called to this field, working with the patients and local physicians to positively change the lives of others.

Having participated in February 2011's Project EAR trip, I formed relationships with fellow missionaries, Dr. Batista, and the patients and staff of the Elias Santana hospital that have continued to grow since



Dr. Batista escorts a patient undergoing cleft palate repair to the operating room.

our time in the Dominican Republic. I greatly appreciate the opportunity to grow both as a surgeon and a person, discovering a new appreciation for family, dedication, and humility.

It is for these reasons that I look forward to a life of discovery through service in Project EAR and similar endeavors. Many thanks to the AAO-HNSF Humanitarian Efforts Committee for their generous support of this and so many other valuable opportunities. [b](#)

## Congratulations 2012 International Travel Grant Winners

**Gregory W. Randolph, MD**, coordinator for International Affairs, and **Nikhil J. Bhatt, MD**, chair, International Otolaryngology Committee, congratulate the five winners of the 2012 International Travel Grants of \$1,000 each to attend the AAO-HNSF 2012 Annual Meeting & OTO EXPO in Washington, DC.

The winners, who are studying in post-residency fellowships in U.S. otolaryngology departments, are:

- Marie Devars du Mayne, MD, University of Montreal (France)
- Pornthep Kasemsiri, MD, Ohio State University (Thailand)
- Gang Li, MD, PhD, Stanford University (China)

- Reza Vaezeafshar, MD, Stanford University (Iran)
- Lucas Viana, MD, Massachusetts Eye & Ear (Brazil)

The travel grant awardees will be recognized during the Opening Ceremony and the International Reception on Tuesday, September 11, 8 pm to 10 pm, Washington Renaissance Hotel. Dr. Bhatt invites them as guests to the International Otolaryngology Committee meeting.

To learn more or apply for a travel grant for the AAO-HNSF 2013 Annual Meeting & OTO EXPO, email [international@entnet.org](mailto:international@entnet.org) or call Catherine Lincoln at 1-703-535-3738.

## Africa, Middle East, and Latin America Caucuses at Annual Meeting

On Monday, September 10, we will conduct two regional caucuses for international delegates to meet with Academy leaders and Academy members interested in the Middle East and Africa. **Merry E. Sebelik, MD**, will host the Africa Caucus, from 7:30 am to 8:30 am, and **G. Richard Holt, MD, MPH, MSE**, will host the Middle East Caucus 9:00 am-10:00 am, both in the International Corresponding Societies (ICS) room at the convention center. A Latin American Caucus hosted by **J. Pablo Stolovitzky, MD**, Sunday September 9, will take place in the International Corresponding Society room in the Convention Center. If interested in any of the caucuses, please email [international@entnet.org](mailto:international@entnet.org). [b](#)

# Special Thanks To Our IRT Partners

We extend a special thank you to the partners of the AAO-HNSF Industry Round Table (IRT) program. Corporate support is critical to realizing the mission of the Academy, to help our members achieve excellence and provide the best ear, nose, and throat care through professional and public education and research. Our partnerships with these organizations who share this mission allow the Academy to continue to provide the programs and initiatives that are integral to our members providing the best patient care.

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opportunities, please contact:

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Phone: 1-703-535-3718  
Email: [development@entnet.org](mailto:development@entnet.org)



## Bay Area Surgical Mission Association Reaches Out to Camarines Sur, Philippines

*Jennifer B. Do, MD*

In January, I was fortunate to take part in the Bay Area Surgical Mission Association (BASMA) trip to the Philippines. I traveled with an 18-person team composed of physicians, nurses, and technicians from Kaiser Permanente Medical Center in Oakland, CA, and Santa Clara, CA.

**Joshua A. Gottschall, MD**, a pediatric otolaryngologist with the Permanente Medical Group, who is now based in Orlando, FL, with the Children's Ear, Nose, and Throat Associates, led the mission. Academy members **Barry M. Rasgon, MD**, **Luke J. Schloegel, MD**, and **Stephen V. Tornabene, MD**, also participated. There were two general surgeons in our group. We joined forces with a team of ophthalmologists from the capital city of Manila, as well as volunteer nurses and interpreters from the area.


The mission drew individuals from a wide geographic area. Many traveled great distances along the treacherous country roads and often-stormy weather to be evaluated for the first time. We operated in two small community hospitals in the neighboring rural communities of Tigaon and Sagnay of the Camarines Sur province.

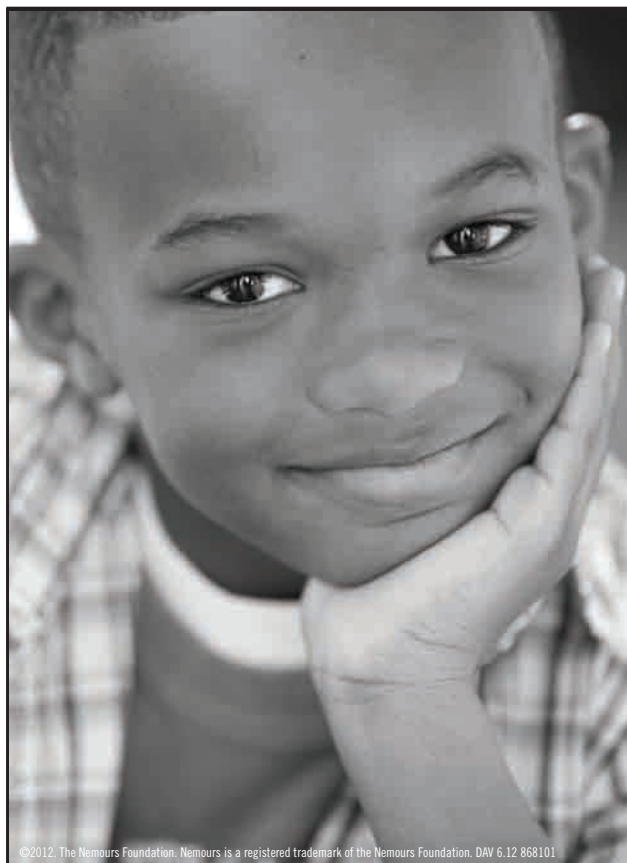
Despite the challenges of limited resources and time, I learned we could still deliver quality care. Flexibility, dedication, and teamwork proved more essential than the modern conveniences of adjustable operating tables and high-powered lighting. During the six days, we saw many patients. Of these, 40 received major operations and 97 minor operations. Otolaryngologic cases included thyroid lobectomy and primary cleft-lip and palate repair. The ophthalmology group performed 146 cases of cataract and pterygium surgery.

Our team accomplished the goal of treating an underserved population with



Jennifer B. Do, MD, with a postoperative cleft palate patient and her father.

otherwise limited access to medical care. Both personally and professionally, I found this was a priceless experience that would enrich the practice of any otolaryngologist. I would like to thank the Academy for its generous support through the Humanitarian Travel Grant for this truly inspirational trip. 



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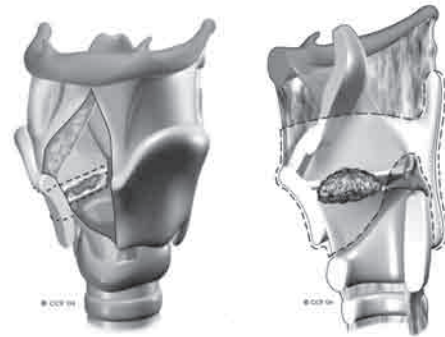
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Director, MUSC Snoring Clinic and Salivary Endoscopy Program  
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#### **Norman Pastorek, MD, PC, FACS**

Clinical Professor, Facial Plastic Surgery, Department of  
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Clinical Professor and Director of the Facial Plastic Surgery  
Fellowship Program, New York University School of Medicine  
New York, NY

**Gavin Setzen, MD, FACS**, President of Albany ENT & Allergy  
Services, PC, and Secretary/Treasurer-Elect of the AAO-HNS  
Albany, NY

**Eugene Tardy, MD, FACS**, Emeritus Professor of  
Otolaryngology at the University of Illinois Medical Center  
Chicago, IL

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Soham Roy, MD, FACS, FAAP

Director of Pediatric Otolaryngology

The University of Texas Medical School at Houston

Department of Otorhinolaryngology-Head & Neck Surgery

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- Two-year partnership potential
- Four-day work week for all doctors (including future associate)
- Private ambulatory surgery center with two operating rooms, AAAHC certified, Medicaid/Medicare approved and state licensed
- Large Allergy Department
- Busy Hearing Aid business with five audiologists
- Electronic Medical Records
- In-office CT Scanner
- Three upscale offices owned by the Practice
- Greater Cincinnati/Northern Kentucky living area offers cosmopolitan/urban, suburban or country lifestyles as well as award winning school systems

**For consideration, send your cover letter and CV to:**  
 Sarah Gosney, Administrative Services,  
 Head and Neck Surgery Associates, P.S.C.  
 40 N. Grand Avenue, Suite 103, Fort Thomas, KY 41075  
 Phone: (859) 572-3046, Fax: (859) 572-3045, Email: sarahg@nkyent.com



**Southern New Hampshire Otolaryngology Group  
Seeks Fourth Physician**

Three established physicians who appreciate hard work, enthusiasm and the highest quality of medical care are looking for a BC/BE Otolaryngologist who shares the same values.

Manchester, New Hampshire is conveniently located one hour from Boston, the seacoast and the White Mountains. New Hampshire is known for its excellent skiing, hiking, biking and fishing. Its beautiful lakes broaden the appeal to those who enjoy an active outdoor lifestyle set in a temperate four-season climate.

Money magazine has named Manchester, NH as the top small city in the Northeast. It boasts low unemployment, low crime rate and is a wonderful city to raise a family. New Hampshire is unique for having no sales or income tax and has the highest qualities of living in the nation!

Southern New Hampshire continues to grow at a rapid pace, therefore affording us the opportunity to expand. Our physicians have worked hard to earn the respect of the community and are held in the utmost regard.

We offer a 2 year partnership tract, competitive salary with incentive bonus and a very generous benefit package including 401K and profit sharing.

To learn more about our group, please visit our website: [www.entspecialistsnh.com](http://www.entspecialistsnh.com) or contact Heather Rice, [Hrice@entspec.org](mailto:Hrice@entspec.org)

**Ear Nose & Throat Specialists of Southern New Hampshire, PA  
30 Canton Street, Suite Two  
Manchester, NH 03103 • (603)656-2100**



**CHARLOTTE EYE EAR NOSE AND THROAT  
MONROE, NC  
COMPREHENSIVE OTOLARYNGOLOGIST**

Charlotte Eye Ear Nose and Throat Associates, PA, (headquartered in Charlotte, North Carolina) a physician-owned and operated dual specialty practice is seeking a BC/BE full time comprehensive otolaryngologist to practice all aspects of the field for 2013 in our Monroe facility located 20 miles from Charlotte. The largest provider of eye and ENT services in the Charlotte area, CEENTA offers a full range of services including general otolaryngology, pediatric otolaryngology, neurotology, laryngology subspecialty representation, voice center with 2 SLP, sleep medicine and facial plastic surgery.

The group, consisting of forty-seven ENT providers and sixteen locations has state of the art equipped offices including complete audiology services, allergy clinics, a CT scanner, an ambulatory surgery center, sleep lab and an in-house contract research organization.

Charlotte, NC is two hours east of the Appalachian Mountains and 3 1/2 hours west of the Atlantic Ocean. It is nationally recognized for combining academic rigor with rich opportunities in the arts and humanities as well as professional and collegiate athletics. It is also recognized as one of the leading cultural capitals of the south and spectators can cheer their home favorite in just about any sport.

Excellent salary with partnership anticipated, 401(k), professional liability insurance, health insurance, long term disability and life insurance.

Annette Potts, Director-Human Resources  
 Charlotte Eye Ear Nose and Throat Associates, PA  
 6035 Fairview Road Charlotte, North Carolina 28210  
 Email: [apotts@ceenta.com](mailto:apotts@ceenta.com)  
 Fax: 704.295.3415  
 EOE

**THE UNIVERSITY OF NORTH CAROLINA SCHOOL OF  
MEDICINE  
CLINICAL FACULTY  
FULL-TIME FACULTY POSITION**

**OTOLARYNGOLOGY/HEAD AND NECK SURGEON-** The Department of Otolaryngology/Head and Neck Surgery, University of North Carolina at Chapel Hill School of Medicine is seeking a board-certified or eligible Otolaryngologist for a full time position of Assistant Professor Level on the Clinical Track. The successful candidate should have an interest in developing a strong clinical program in otolaryngology with a special expertise in Head and Neck Oncology and have demonstrated the potential for teaching, patient care and clinical research. Fellowship training in Head and Neck Oncology is preferred. Projected start date is fall of 2012.

*Apply online at <http://jobs.unc.edu/2502579>.*

**Address cover letter to:**  
 Harold C. Pillsbury, MD  
 Professor and Chair

Otolaryngology/Head and Neck Surgery  
 170 Manning Drive, Physician Office Building, CB# 7070  
 University of North Carolina School of Medicine  
 Chapel Hill, NC 27599-7070  
 (919) 966-3342  
 Fax (919) 966-7941

*The University of North Carolina at Chapel Hill is an equal opportunity/ADA employer.*



## OTOLARYNGOLOGIST NJ Licensed • Full Time

At Summit Medical Group, located in Northern New Jersey, we provide a wide array of services that enhance patient care, promote the physician lifestyle, and allow us to provide the highest level of quality healthcare and patient satisfaction.

- A legacy of excellence since 1929
- Large multi-specialty group with 200+ providers
- On-site ASC, Urgent Care Center, Imaging and Laboratories
- Electronic medical record system
- Solid referral base due to the large number of primary care physicians

*Candidate must be a Board Certified,  
NJ licensed ENT Physician.*

We offer competitive compensation and a comprehensive benefit package. Please send CV to: Summit Medical Group, Medical Staff Services, 1 Diamond Hill Road, Berkeley Heights, NJ 07922, Fax: 908-277-8786 or Email: [providerrecruit@smgnj.com](mailto:providerrecruit@smgnj.com). We are a smoke-free environment, EOE.



## Neurotologist Opportunity in St. Louis, MO

Sound Health Services in St. Louis, MO is seeking a fellowship-trained neurotologist who has completed a recognized otolaryngology residency program and is BC/BE in otolaryngology. Excellent clinical ability and strong surgical skills are required.

Sound Health Services is the largest, independent otolaryngology practice in the St. Louis region. We consist of 18 otolaryngology physicians and surgeons providing services at 10 locations throughout the St. Louis metropolitan area. Our physicians and surgeons are on staff and provide services at 10 of the St. Louis market's most prestigious healthcare facilities.

For more information, please contact: Allen Mackley, Executive Director, at 314-729-0077, email [amackley@soundhealthservices.com](mailto:amackley@soundhealthservices.com) or visit [www.soundhealthservices.com](http://www.soundhealthservices.com)



*One Group. Sound Health. Complete ENT Care.*

## Otolaryngology - Head and Neck Academic

The Department of Otolaryngology at the MetroHealth Medical Center campus of Case Western Reserve University is seeking applications for a BC/BE position in Head and Neck Surgery. The successful applicant will oversee our active Head and Neck Cancer service including clinical practice, teaching, and research opportunities. The ideal candidate will have fellowship training in Head & Neck and/or Reconstructive Surgery and will have a full-time faculty appointment through Case Western Reserve University appropriate to their experience and training.

**Interested applicants should send a current CV to:**

Joseph B. Carter, MD  
Chairman, Department of Otolaryngology  
Head and Neck Surgery  
MetroHealth Medical Center  
2500 MetroHealth Dr.  
Cleveland, OH 44109

*In employment, as in education, Case Western  
Reserve University is committed to Equal  
Opportunity and World Class Diversity*

## Associates in Otolaryngology of No. Virginia

Northern Virginia Otolaryngology Position in Fast-Growing Practice

### Job Description:

We are looking for a Board Certified/Board Eligible ENT physician to fill a position in our busy three office practice. We are located in Alexandria, Springfield and Herndon, VA minutes from all that Washington, DC has to offer. We have wonderful Fairfax County schools and safe and welcoming neighborhoods. We have a fully integrated state-of-the-art billing and EMR system. Our practice consists of two Board Certified ENT Physicians and two Physicians Assistants. We offer our patients audiology services and hearing aids, allergy testing and serum for both injection and oral immunotherapy. TNE, in-office ultrasound of thyroid and ultrasound guided procedures. We have a great referral base and are looking for a Physician who is excited to join our team. We offer attractive salary with productivity bonus with partnership options available. Benefits include malpractice insurance, medical insurance and 401K Plan.

### Direct Contact Information:

Please contact Dr. Nathan at:  
Cell phone: 703-980-5301  
E-mail: [mnate919@aol.com](mailto:mnate919@aol.com)  
Fax: 703-255-0365

### **McLeod Health Florence, South Carolina**

A two doctor private practice in Florence, South Carolina is recruiting a Board Certified/Eligible ENT physician. Call will be 1/5. This highly reputable, busy practice is well-equipped with microscopes in each exam room, fiber optic laryngoscopes and sinus scopes, and audiology services. EMR has been implemented in the practice, including radiology and e-prescribing.

The population of Florence and its surrounding area is approximately 200,000 people. In the 12 county referral area the population is nearly 1,000,000 people. The geographic location is such that you can reach our capital city, Columbia, in an hour, historic Charleston in about 2 hours and the beaches in 1 hour. The mild climate allows us to utilize the excellent recreational opportunities on nearly a year-round basis.

**For more information, contact:**

Tiffany Ellington  
843-777-5169

tellington@mcleodhealth.org.

Please visit our website: [www.mcleodhealth.org](http://www.mcleodhealth.org) and  
[www.farrellmckayent.com](http://www.farrellmckayent.com).



### **ACADEMIC HEAD & NECK SURGEON West Virginia University**

The Department of Otolaryngology at West Virginia University is seeking a fellowship-trained head and neck surgeon to expand our well established head and neck oncology service. Expertise with both ablative and microvascular reconstructive procedures is desired. Responsibilities include teaching of residents and medical students, patient care and clinical/basic research.

The Department currently has ten physician faculty members and fifteen residents and has an active NIH-funded research division with three PhD scientists.

West Virginia University is located in beautiful Morgantown, which is rated one of the best small towns in America in regard to quality of life. Morgantown is located 80 miles south of Pittsburgh and three hours from Washington, DC. The position will become available in October 2011 and will remain open until filled. The WVU Health Sciences Center is a smoke free campus. West Virginia University is the recipient of an NSF ADVANCE award for gender equity.

**Contact:**

Hassan Ramadan, MD  
Department of Otolaryngology  
R.C. Byrd Health Sciences Center  
Morgantown, WV 26506-9200  
Telephone: (304) 293-3233; Fax: (304) 293-2902  
e-mail: [hramadan@hsc.wvu.edu](mailto:hramadan@hsc.wvu.edu)  
West Virginia University is an EOE/AA employer.



### **HEAD & NECK ENDOCRINE SURGEON DEPARTMENT OF OTOLARYNGOLOGY - HEAD & NECK SURGERY UNIVERSITY OF CALIFORNIA, SAN FRANCISCO**

Full-time academic position for a clinician or clinician-scientist with expertise in Head and Neck Surgery with an emphasis on Thyroid and Parathyroid Surgery. Academic rank depends upon qualifications. Candidates must be board certified or eligible, and eligible for a California medical license. Candidates will be expected to participate in clinical training and research programs for medical students and residents.

**Please forward a letter of inquiry and  
C.V. to:**

Lisa Orloff, MD, FACS  
Chair, UCSF Search Committee  
Department of Otolaryngology-Head and  
Neck Surgery  
University of California, San Francisco  
2233 Post Street, 3rd Floor, Box 1225  
San Francisco, CA 94115  
Telephone (415) 885-7528  
Fax (415) 885-7711  
[lorloff@ohns.ucsf.edu](mailto:lorloff@ohns.ucsf.edu)

**Search number # M-3329**

*UCSF seeks candidates whose experience, teaching, research, or community service has prepared them to contribute to our commitment to diversity and excellence. UCSF is an Affirmative Action/Equal Opportunity Employer. The University undertakes affirmative action to assure equal employment opportunity for underutilized minorities and women, for person with disabilities, and for covered veterans.*



## **BE A PART OF NEW YORK'S PREMIER ENT PRACTICE**

### **Unique Practice Opportunity for BE/BC Otolaryngologist**

- Lucrative package with substantial starting salary and bonus incentives
- Partnership in two years without buy-in or buy-out

One of the largest and most established private group practices in New York and Long Island offers an exceptional opportunity for a highly motivated individual to join our successful practice specializing in all areas of General Otolaryngology including facial cosmetic surgery.

We have state of the art offices offering allergy, comprehensive audiology services, FEESST/Stroboscopy, and in office CT scanners.

Office locations on Long Island, and in the New York City Boroughs.

**Contact Carlos Lopez at  
cell # 516-220-6448  
or email to [nyents@optonline.net](mailto:nyents@optonline.net)**

\*\*\* Onsite interviews will be available at the AAO-HNS annual meeting in Washington, D.C. \*\*\*



## Academic Otolaryngology Opportunities

University Hospitals Medical Group (UHMG), the unified faculty practice plan of University Hospitals of Cleveland (UH), is comprised of several practices representing medical and surgical specialties located within University Hospitals Case Medical Center and throughout Northeastern Ohio. As part of our historic primary affiliation, UHMG physicians serve on the faculty of Case Western Reserve University School of Medicine. UHMG strives to champion the success of the physician practices and UH in fulfilling our mission: To Heal. To Teach. To Discover.

Due to increased patient demand and institutional support for expansion, the Department of Otolaryngology - Head and Neck Surgery at University Hospitals Case Medical Center in Cleveland, Ohio is seeking to add the following full time academic faculty positions:

- Rhinologist- Allergy Surgeon (fellowship trained)
- Otologist/Neurotologist (fellowship trained)
- Pediatric Otolaryngologist (fellowship trained)
- Head and Neck Surgeon Scientist with a focus on squamous cell carcinoma research
- General Otolaryngology with an interest or additional training in sleep medicine
- Laryngologist trained in tracheotomy care, voice surgery and cartilage research (fellowship trained)

We offer a comprehensive compensation package and excellent benefits including CME funding, paid vacation and educational time, medical, dental and vision coverage and more. University Hospitals is proud to be an equal opportunity employer.

Candidates may forward a current CV to: [Stacy.Porter@UHhospitals.org](mailto:Stacy.Porter@UHhospitals.org) or mail to:

Cliff A. Megerian, MD  
Chair, Department of Otolaryngology-Head and Neck Surgery  
Director, Ear, Nose and Throat Institute  
c/o Stacy M. Porter, Manager of Institute and Department Practices  
11100 Euclid Avenue  
Mailstop LKS 5045



## Head and Neck Surgery and Reconstruction Fellowship

The Department of Otolaryngology-Head and Neck Surgery in conjunction with University Hospitals Case Medical Center and the Seidman Cancer Center is proud to announce the establishment of a one-year Head & Neck Surgery and Reconstruction fellowship beginning **July 2013**. The head and neck surgical team includes **Drs. Pierre Lavertu, Rod Rezaee and Chad Zender**.

### ***This one year fellowship offers advanced training in:***

- Microvascular free tissue transfer
  - **Over 120 cases per year**
- Endoscopic and open skull base surgery
- Minimally invasive head and neck surgery
  - Transoral laser and transoral robotic surgery
- Sentinel node mapping for head and neck melanoma

### ***Fellowship requirements and opportunities include:***

- Clinical duties
- Teaching residents and medical students
- 1-11 call
- Clinical or basic science research
- Participation in our resident microvascular course and skull base workshop
- Travel and presentation at national meetings
- Productivity bonus in line with a competitive fellowship salary

### ***Applicant requirements:***

- Completion of an ACGME accredited Otolaryngology-Head and Neck surgery residency
- ABO board eligible or certified
- Ohio Medical license eligible

Please visit <http://uhhospitals.org/ENT> to view the position online and to submit CV for consideration.

### **For more information please contact:**

Chad Zender, MD, FACS  
Assistant Professor and Fellowship Director  
University Hospital-Case Medical Center  
Department of Otolaryngology-Head and Neck Surgery  
[Chad.Zender@UHhospitals.org](mailto:Chad.Zender@UHhospitals.org)  
216-844-5307

# HEAD AND NECK MICROVASCULAR SURGEON

**THE UNIVERSITY OF MISSISSIPPI  
MEDICAL CENTER • JACKSON**

The Department of Otolaryngology and Communicative Sciences seeks an additional head and neck microvascular surgeon to join our head and neck team. Responsibilities include teaching, research and patient care at our University Hospital and the adjacent Veterans Affairs Medical Center.

The department has divisions of otolaryngology, research, communicative sciences, dermatology and oral oncology and biobehavioral medicine. This creates a unique opportunity for multidisciplinary patient care and research within the department.

Rank, salary and tenure track will be commensurate with experience and training.

***To apply for this opportunity, send a letter of interest, curriculum vitae and bibliography to:***

Scott P. Stringer, M.D., M.S.  
Department of Otolaryngology and  
Communicative Sciences  
The University of Mississippi Medical Center  
2500 North State Street, Jackson, MS, 39216-4505  
601-984-5167 (phone); 601-984-5085 (fax)  
sstringer@umc.edu

*For additional information about the Medical Center and the department, visit <http://ent.umc.edu>.*

*To learn more about the state of Mississippi, log on to [www.mississippibelieveit.com](http://www.mississippibelieveit.com).*



Equal Opportunity Employer, M/F/D/V.

## Academic Head and Neck Surgeon Virginia Commonwealth University

The Department of Otolaryngology-Head and Neck Surgery at Virginia Commonwealth University seeks a BE/BC fellowship trained head and neck surgeon to join an established and growing head and neck surgery division. Microvascular free flap reconstruction, transoral robotic surgery, and endocrine surgery programs are in place and skills in these areas are desired.

Applicants should have a strong interest in clinical care, teaching, and research. Salary and academic appointment will be competitive and commensurate with experience.

We support a diverse university environment with a strong commitment to multicultural opportunities. VCU is an EEO/AA employer and encourages women, minorities and persons with disabilities to apply.

***Please send curriculum vitae and three references to:***

Laurence J. DiNardo, M.D., F.A.C.S.  
Peter N. and Julia R. Pastore Professor and Chair  
Department of Otolaryngology-Head and Neck Surgery  
Virginia Commonwealth University Health System  
PO Box 980146  
Richmond, VA 23298-0146  
FAX: (804) 828-5779  
e-mail: [ldinardo@mcvh-vcu.edu](mailto:ldinardo@mcvh-vcu.edu)

## ENT/Otolaryngologist

MaineGeneral Medical Center in Augusta, Maine is seeking a BC/BE ENT/Otolaryngologist. You will join an established practice with a strong referral base with opportunity to specialize. This state-of-the-art office space has been completely renovated and is located beside our Allergy and Audiology departments. We offer excellent benefits including three pension plans, relocation assistance, loan forgiveness, and competitive salary. We are located in scenic central Maine, just a short drive away from ski resorts, lakes and rivers, award-winning golf courses, abundant hiking trails, and the beautiful Maine coast. We are just an hour north of Portland, Maine's largest city, and three hours from Boston. MaineGeneral is currently building a new, state-of-the-art, 192-bed regional hospital to open in late 2013 that will consolidate inpatient hospital services in Augusta. Visit [ournewhospital.org](http://ournewhospital.org) for details!

***Please send CV to Lisa Nutter, Physician Recruiter at [lisa.nutter@mainegeneral.org](mailto:lisa.nutter@mainegeneral.org), call 1-800-344-6662, or visit [mainegeneral.org](http://mainegeneral.org) for more information.***



**PEDIATRIC OTOLARYNGOLOGIST  
DEPARTMENT OF OTOLARYNGOLOGY -  
HEAD & NECK SURGERY  
UNIVERSITY OF CALIFORNIA, SAN  
FRANCISCO**

UCSF Department of Otolaryngology-Head and Neck Surgery seeks a pediatric otolaryngologist for a very busy pediatric outpatient clinic and potential work as a pediatric hospitalist. Individual should seek an academic career, with strong interest in resident and fellow education, as well as clinical research. The selected candidate will work as part of a practice with outpatient clinics in outlying geographic areas (Marin, Contra Costa County). There is significant growth potential, with a new dedicated pediatric hospital opening in 2015 (Benioff Children's Hospital). Must demonstrate superior patient care skills, and ability to work as part of a multi-disciplinary surgical team.

Candidate must be MD or MD/PhD and completion of an accredited residency in otolaryngology/head and neck surgery, as well as Fellowship training in Pediatric Otolaryngology. Must be BE/BC and hold or be eligible for a CA medical license.

**Please forward a letter of inquiry and C.V. to:**

Kristina Rosbe, MD  
Professor, Chair, UCSF Search Committee  
Department of Otolaryngology-Head & Neck  
Surgery  
University of California, San Francisco  
2233 Post Street, 3rd Floor, Box 1225  
San Francisco, CA 94115  
Telephone (415) 514-6540  
Fax (415) 885-7546  
krosbe@ohns.ucsf.edu

**Search number # M-3582**

*UCSF seeks candidates whose experience, teaching, research, or community service has prepared them to contribute to our commitment to diversity and excellence. UCSF is an Affirmative Action/Equal Opportunity Employer. The University undertakes affirmative action to assure equal employment opportunity for underutilized minorities and women, for person with disabilities, and for covered veterans.*



**The Department of Otolaryngology/Head & Neck Surgery at West Virginia University** is seeking a general otolaryngologist to join a thriving academic practice in the summer of 2013. Applicants must be board certified/eligible by the American Board of Otolaryngology. Responsibilities include teaching of residents and medical students, patient care and clinical/basic research.

The department currently has ten physician faculty members and fifteen residents and has an active NIH-funded research division with three PhD members.

With a metro area population of over 115,000, Morgantown, WV, is consistently rated as one of the best small cities in the U.S., with affordable housing, excellent schools, a picturesque countryside, many outdoor recreational activities, and close proximity to major cities, such as Pittsburgh, PA, and Washington, DC.

**The position will remain opened until filled. For more information please contact:**

Laura Blake  
Director, Physician Recruitment  
blakel@wvuhealthcare.com  
Fax: 304.293.0230  
<http://www.hsc.wvu.edu/som/otolaryngology/>

*West Virginia University is an AA/EEO Employer. WVU Health Sciences is a tobacco free campus. West Virginia University is the recipient of an NSF ADVANCE award for gender equity.*

**NY Eye & Ear  
Infirmary**

Affiliated Teaching  
Hospital of New York  
Medical College

Continuum Health Partners, Inc.

**Seeking board certified,  
fellowship trained  
Pediatric Otolaryngologist**

The Department of Otolaryngology/Head & Neck Surgery at The New York Eye and Ear Infirmary has a faculty position available for fellowship trained pediatric otolaryngologist. Build tertiary level pediatric practice in state-of-the-art settings at NYEE as well as physician satellite offices in multiple geographic areas throughout the New York metro area.

Joseph M. Bernstein, MD  
Director, Division of Pediatric Otolaryngology  
The New York Eye and Ear Infirmary  
Continuum Otolaryngology Service Line  
Phone: 212-979-4071  
Email: [jbernstein@nyee.edu](mailto:jbernstein@nyee.edu)

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Best Hospitals by US News & World Report.**





**FACIAL PLASTICS/AESTHETICS  
DEPARTMENT OF OTOLARYNGOLOGY—  
HEAD AND NECK SURGERY  
UNIVERSITY OF CALIFORNIA, SAN  
FRANCISCO**

UCSF Department of Otolaryngology-Head and Neck Surgery seeks a facial plastic and reconstructive surgeon to focus on reconstructive head/neck surgery and microvascular surgery. Individual should seek an academic career, with strong interest in resident and fellow education, as well as clinical research. The selected candidate will work as part of a busy Head and Neck Oncologic surgery practice within an NCI-designated Comprehensive Cancer Center. There is significant growth potential, with a new dedicated adult cancer hospital opening in 2015. Must demonstrate superior patient care skills, and ability to work as part of a multi-disciplinary surgical team.

Candidates must be MD/ or MD/PhD and completion of an accredited residency in otolaryngology/head and neck surgery. Must be BE/BC. Demonstrated experience in microvascular surgical technique preferred.

**Please forward a letter of inquiry and C.V. to:**

P. Daniel Knott, MD  
Chairman, UCSF Search Committee  
Associate Professor  
Director, Division of Facial Plastic and  
Reconstructive Surgery  
Department of Otolaryngology - Head and Neck Surgery  
University of California, San Francisco  
2233 Post Street, 3rd Floor, Box 1225  
San Francisco, CA 94115  
Telephone (415) 502-0498  
Fax (415) 885-7546  
pdknott@ohns.ucsf.edu

*Search number # M-3581*

*UCSF seeks candidates whose experience, teaching, research, or community service has prepared them to contribute to our commitment to diversity and excellence. UCSF is an Affirmative Action/Equal Opportunity Employer. The University undertakes affirmative action to assure equal employment opportunity for underutilized minorities and women, for person with disabilities, and for covered veterans.*

**DEPARTMENT OF OTORHINOLARYNGOLOGY  
UNIVERSITY OF OKLAHOMA  
HEALTH SCIENCES CENTER  
POSITION AVAILABLE: RHINOLOGIST  
DATE AVAILABLE: IMMEDIATELY**

The Department of Otorhinolaryngology of the University of Oklahoma Health Sciences Center has a position available for a full-time otolaryngologist at the Assistant or Associate Professor level. Specific expertise is required in rhinology.

Minimum requirements include: Doctoral degree (M.D. or equivalent), Board certification/eligibility, a demonstrable commitment to teaching and an interest in collaborative research.

Responsibilities will include program development and patient care, resident and medical student education, and research.

**Letters of interest with accompanying  
CV should be directed to:**

Greg A. Kreml, M.D., F.A.C.S.  
Department of Otorhinolaryngology  
P.O. Box 26901, Williams Pavilion 1290  
Oklahoma City, OK 73126-0901

*The University of Oklahoma is an Affirmative Action and Equal Opportunity Employer.*

**UF UNIVERSITY of  
FLORIDA  
Department of Otolaryngology  
Academic Opportunities  
HEAD & NECK ONCOLOGIC SURGEON**

The Department of Otolaryngology at the University of Florida is seeking applicants who wish to pursue an academic career in Head and Neck Oncologic Surgery at the rank of Assistant/Associate Professor. Fellowship training in Head and Neck Surgery is required, and experience in microvascular reconstructive surgery is preferred. Track and rank will be commensurate with experience. This position will remain open until filled. Applicants should have a strong interest in clinical care, teaching and research. Applicants should be board certified or board eligible and licensed (or eligible) to practice in Florida. Salary is negotiable and will be commensurate with experience and training.

**Please address inquiries to:**

John W. Werning, MD  
University of Florida  
Department of Otolaryngology  
P.O. Box 100264  
Gainesville, FL 32610-0264  
John.Werning@ent.ufl.edu

## OTOLARYNGOLOGIST

**Geisinger Health System is seeking a BC/BE Otolaryngologist**

Bring your expertise to a well-established program at Geisinger Wyoming Valley Medical Center in Wilkes-Barre, PA. Take part in the growth of this dynamic department, teach residents and pursue research in your area of interest.

Visit **Join-Geisinger.org/266/OtoGWV** to learn more about this position or contact Autum Ellis, Physician Recruiter, at 1-800-845-7112 or amellis1@geisinger.edu.

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HEALTH SYSTEM

REDEFINING THE BOUNDARIES OF MEDICINE

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**WAYNE STATE**  
**UNIVERSITY**  
SCHOOL OF MEDICINE

Faculty Positions

**THE DEPARTMENT OF OTOLARYNGOLOGY -  
HEAD & NECK SURGERY**  
is currently seeking to hire

**ACADEMIC OTOLARYNGOLOGISTS**

With training and/or interest in either microlaryngology or pediatric surgery

The successful candidates must demonstrate experience and capability. Academic appointment and compensation commensurate with training and experience. Practice income available to augment negotiated salary.

Send letter of interest and CV to:

**Robert H. Mathog, M.D.**  
Professor and Chair  
Department of Otolaryngology  
540 E. Canfield, 5E-UHC  
Detroit, MI 48201  
(313) 577-0804

*Wayne State University is an  
Equal Opportunity/Affirmative Action Employer*



EVERY LIFE DESERVES WORLD CLASS CARE

**General Otolaryngologist**

The Cleveland Clinic Head and Neck Institute is currently seeking a General Otolaryngologist to treat adults and children with a wide variety of ear, nose, sinus, mouth, throat and neck problems. This otolaryngologist will see patients at one or more of Cleveland Clinic's state of the art family health centers in the suburbs of Cleveland. The successful candidate must be Board Eligible/Certified by the American Board of Otolaryngology.

The otolaryngology program is part of the Head & Neck Institute, a comprehensive, multidisciplinary institute that also includes general dentistry, oral and maxillofacial surgery, prosthodontics, periodontics, speech language pathology and audiology. More than 40 faculty members in the institute pool their talents and expertise to achieve excellence in education, research and patient outcomes. In 2011, Cleveland Clinic's otolaryngology program was ranked No. 8 in the country by U.S. News & World Report in its 2011 "America's Best Hospitals" survey, the best ranking in Ohio. Our program has also consistently ranked in the top ten in the country for the past several years.

Cleveland Clinic offers a very competitive salary enhanced with an attractive benefits package. We offer a pleasant, stable and collegial work environment with an unmatched quality of life.

The same vitality that charges Cleveland Clinic extends to almost every aspect of life in Greater Cleveland. The melting-pot culture that has helped establish Cleveland as a vibrant and versatile metropolitan area adds a unique flair to the lifestyle here. The Cleveland area is a very comfortable and affordable place to live with a variety of available activities, good school systems, and a great place to raise a family.

Cleveland Clinic is an equal opportunity employer and is committed to increasing the diversity of its faculty. It welcomes nominations of and applications from women and members of minority groups, as well as others who would bring additional dimensions to its research, teaching, and clinical missions. Cleveland Clinic is a smoke and drug free work environment.

Interested candidates should submit an application online by going to [www.clevelandclinic.org/careers](http://www.clevelandclinic.org/careers) and search under Physician Opportunities.



UNIVERSITY OF NEBRASKA  
MEDICAL CENTER

### General Otolaryngology

Excellent opportunity is available for a general Otolaryngologist. A combination of general ENT and subspecialty interest would be considered.

### Rhinology

Fellowship trained or equivalent experience Rhinologist is sought to maintain and grow a developed Rhinology based practice.

### Laryngology

Fellowship trained or equivalent experience Laryngologist is sought to help build a nationally prominent laryngology and voice practice.

Applicants should be BC/BE, licensed to practice in Nebraska and have a strong interest in clinical care, teaching and scholarship. Salary is negotiable and commensurate with experience and training.

Dwight Jones, MD, Chair  
Department of Otolaryngology – Head & Neck Surgery  
981225 Nebraska Medical Center  
Omaha, NE 68198-1225  
ent@unmc.edu

*An equal opportunity/affirmative action employer. Minorities and women are encouraged to apply.*



### University of Florida College of Medicine–Jacksonville Seeks Otolaryngologist

The University of Florida College of Medicine–Jacksonville, Department of Surgery, Division of Otolaryngology, seeks a full-time faculty member at the tenure or non-tenure accruing level of Assistant/Associate Full-time Professor.

This is an opportunity for expanding a fast-growing academic practice. It offers a diverse clinical population allowing any specialty area of focus. No trauma call. Satellite clinic; Outpatient surgical center. Major responsibilities include teaching, patient care, administration and research. Responsibilities may also include serving as the Division Chief based upon experience and interest. MD, DO and Board Certified or Board Eligible in Otolaryngology. Competitive salary and excellent benefits.

Application deadline is open until position is filled. **Send CV and three letters of recommendation to:** Search Chair, Iman Naseri, M.D. Position number 00017206, Department of Surgery, 653 West 8th Street, Jacksonville, FL 32209 or e-mail iman.naseri@jax.ufl.edu or fax to (904) 244-7730.

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

### General Otolaryngologist

POSITION NUMBER: M0202609

The University of Kansas Otolaryngology-Head & Neck Surgery Department is seeking a General Otolaryngologist to join a faculty of 15 physicians. The successful candidate will develop a practice at The Kansas University Medical Center and affiliated hospital sites and teach residents & medical students.

### Head and Neck Surgeon

POSITION NUMBER: J0010781

The University of Kansas Otolaryngology-Head & Neck Surgery Department is seeking a BC/BE Head and Neck Surgeon for a full-time academic position. Fellowship training with expertise in microvascular surgery and an interest in oncologic research preferred.

Responsibilities include continued development of a strong clinical practice with three other members of the Head and Neck Team, resident and medical student education, and clinical or basic science research.

### Head and Neck Fellow

POSITION NUMBER: J0020146

#### CLINICAL FOCUS

Head and Neck Surgical Oncology, Skull Base Surgery (anterior and lateral), Minimally Invasive Endoscopic Laser Surgery, Minimally Invasive Endocrine Surgery, Microvascular Reconstructive Surgery

Responsibilities will include clinical activities, clinical/basic science research, and resident and medical student teaching. Additional educational opportunities include a graduate level Clinical Research Training series, access to a microvascular laboratory, a craniomaxillofacial plating course and clinical research support personnel.

#### APPLICANT REQUIREMENTS

Successful completion of an ACGME-accredited Otolaryngology-Head and Neck Surgery Residency training program, ABO board certified/eligible and Kansas and Missouri license eligible.



### To view position online:

<http://jobs.kumc.edu>  
(Search by Position Number)

### For job information or to apply, contact:

Douglas Girod, MD, FACS  
Professor and Chairman

The University of Kansas  
School of Medicine  
Department of Otolaryngology-  
Head & Neck Surgery  
3901 Rainbow Blvd. MS 3010  
Kansas City, KS 66160

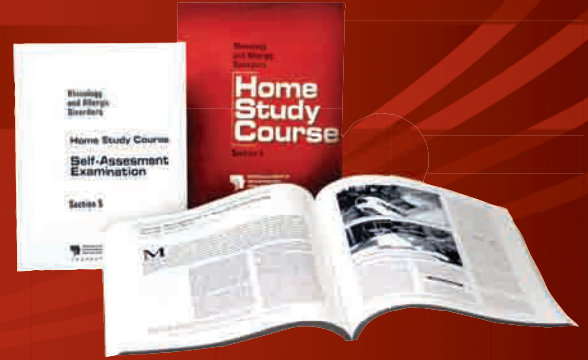
Phone: 913-588-6719  
Email: dgirod@kumc.edu

*The University of Kansas School of  
Medicine is an Equal Opportunity/  
Affirmative Action employer.*



# 2012 Home Study Course Registration deadline

## September 3, 2012



For more Home Study Course information: [www.entnet.org/hsc](http://www.entnet.org/hsc)

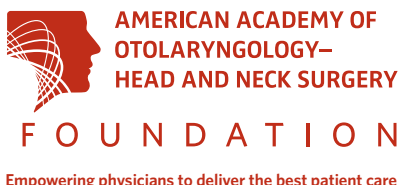
Registration fee is based on AAO-HNS membership status at the time form is received.

**Payment must be received by September 3, 2012, to receive 2012–2013 courses. First packet begins mailing in late August.**

PRACTICING PHYSICIANS & ALLIED HEALTH PROFESSIONALS			
Order 2 YEARS and SAVE!	Member Regular	Nonmember Regular	Total
One Year	<input type="checkbox"/> \$590	<input type="checkbox"/> \$765	\$
Two Years	<input type="checkbox"/> <b>\$890</b>	<input type="checkbox"/> \$1205	\$
<b>Best Buy!</b>		Airmail fee*	\$
<b>TOTAL</b>			\$
OTOLARYNGOLOGY RESIDENTS			
RESIDENT PRICES	Resident Member Regular	Resident Nonmember Regular	Total
One Year	<input type="checkbox"/> \$400	<input type="checkbox"/> \$560	\$
Two Years	<input type="checkbox"/> <b>\$615</b>	<input type="checkbox"/> \$870	\$
<b>Best Buy!</b>		Airmail fee*	\$
<b>TOTAL</b>			\$

\*Registrants outside U.S.A. add **AIRMAIL FEE** of **\$120 for one year** and **\$240 for two years**.

Mail or fax your order with full payment to:  
AAO-HNSF  
PO Box 418546  
Boston, MA 02241-8546  
Fax credit card orders: 1-703-519-1570  
For more information, call: 1-703-535-3776  
or email: [Llee@entnet.org](mailto:Llee@entnet.org)



### Address Information

☐ New address for ALL Academy correspondence ☐ New address for HSC ONLY  
Your Home Study Course (HSC) and all other AAO-HNS/F publications will be mailed to the same address.

First Name	Family/Last Name	Degree (MD, DO, PhD)
AAO-HNS ID# (Please note that an AAO-HNS ID# does not automatically signify membership.)		
Address		
Address (No P. O. boxes, please)		Suite/Room
City		State/Province
ZIP+4/Postal Code		Country
Phone/Extension	Fax	Email

### Exam Options (Choose One)

☐ Paper version ☐ Online:  
(email required) \_\_\_\_\_

### Present Position

☐ Resident in Otolaryngology–HNS  
(Copies of your examination profiles will be sent to your program director)

Institution	Program Year	Program Director
<input type="checkbox"/> Practicing Otolaryngologist <input type="checkbox"/> Other (specify) _____		

### Payment

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

☐ Check ☐ VISA ☐ MasterCard ☐ American Express

Account #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Registration closes September 3, 2012. A \$200 late registration penalty will be applied to all registrations **RECEIVED** after September 3, 2012.



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