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American Academy of Otolaryngology—Head and Neck Surgery

August 2014—Vol.33 No.08

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Quality and More

Last month in this column I talked about the new role the AAO-HNSF has taken in the development of quality measures and the stewardship of existing measures. The AAO-HNSF's first measures project, with the ABO, which was facilitated by the AMA, produced two measures groups for Acute Otitis Externa (AOE) and Adult Sinusitis. And I have more to share.



Richard W. Waguespack, MD
AAO-HNS/F President

meet requirements for Maintenance of Certification (MOC) and CMS quality programs in addition to research related to their specialty. Developing a registry that could be useful to the majority of our members will be a large undertaking. Therefore, the Board approved under our strategic plan, the

development of a task force to research and recommend how the Foundation should go forth with a registry project.

Data Registry

Another major initiative for the Foundation in the quality arena is addressing the development of a data registry for otolaryngology. Many societies utilize their society-developed registries as a means for members to

A Presidential Invitation to the OTO EXPOSM

This August issue features the listing of Annual Meeting Exhibitors for 2014 in

Orlando. There are several new features in the OTO EXPOSM in 2014.

The first is the President's Reception will take place on the EXPO show floor from 6:00 pm to 7:30 pm on Sunday, September 21. I think this will allow attendees to enjoy the innovation and excitement of advances in our specialty in a social and collegial setting.

Second, remember that the Annual Meeting will run from Sunday, September 21, through Wednesday, September 24, but the OTO EXPOSM will close at 3:00 pm on Tuesday, September 23.

Other OTO EXPOSM changes include the Hands-On Demonstration and Training Lab, which are supported by the corporate community in conjunction with the American Academy of Otolaryngology-Head and Neck Surgery Foundation. Participating companies will provide all medical material supplies, tissue, and cadaveric specimens to provide unique hands-on learning environment experience. This is an exciting new venue that will provide attendees with additional, interactive learning opportunities.

I hope that I can plan on seeing you there. 

Having the Proper Perspective

In response to the rapid changes in healthcare, reform of delivery and payment models, and the huge ripples affecting physician/patient relationships and practice models, attention has been paid to the physician's individual satisfaction and how it may be changing. The American Medical Association (AMA) contracted a study from the Rand Corporation which concluded, not surprisingly, that "...[W]hen physicians perceived themselves as providing high-quality care or their practices as facilitating their delivery of such care, they reported better professional satisfaction."¹ The report goes on to state that



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

barriers to providing such care and achieving that satisfaction can arise both from within the practice (lack of support of leaders and practice partners, internal conflicts) and be imposed from external sources (mandates, regulations, denials of coverage, utilization hassles, reporting burdens, EMRs, etc.). If you haven't read this report, I strongly urge you to review its findings and ponder how it may relate to your situation.

As I have read this report and heard it discussed at several strategic meetings, and

listened and participated in the conversations regarding how to restore, improve, and augment physician satisfaction by facilitating physician's desire to provide high quality care, I am reminded of the social and behavioral science literature on the role of norms and adaptation in the measurement of individual happiness. For the last century, progressive studies of human happiness have revealed results that are perhaps not intuitive. Using validated survey instruments, studies show that nations whose populations are relatively happy have higher rates of suicide than those with generally reported lower levels of happiness. Carol Graham, Senior Fellow at the Brookings Institute has written *Happiness Around the World: The Paradox of Happy Peasants and Miserable Millionaires*. Poor people in very poor countries report higher levels of happiness than poor people in wealthier countries with far more income and resources and a higher standard of living; "Because," as Dr. Graham states, "average country income (Continued on page 5)



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levels do not matter to happiness, but relative distances from the average do...”

As we navigate the challenges of health care reform, we feel the stress and strain of being required to understand concepts that were not necessarily part of our medical training – management of systems and populations, assessing and stewarding global costs of care, balancing actuarial and longitudinal data with individual accountability for specific patient encounters and goals.

In his book, *David and Goliath*, author Malcolm Gladwell reminds us of the concept of “relative deprivation,” a term coined by sociologist Samuel Stouffer during World War II, studying over half a million men over a wide range of comparative situations. He concluded that “...

we form our impressions not globally, by placing ourselves in the broadest possible context, but locally – by comparing ourselves to people in the same boat as ourselves.”

As we add new skills and abilities in leadership, followership, knowledge management, communications, collaborative team-based care, inter-professional education, and many others, it will serve us well to remember how incredibly blessed we are in our global outlook. Let’s use those advantages – technology, political freedom, financial resources, public respect, education, and collegial relationships to forge better systems of health care, reduce waste, improve patient outcomes, and advance public health. 

1. http://www.rand.org/pubs/research_reports/RR439.html

Interested in Our History?

1. Join or renew your membership in the Otolaryngology Historical Society (OHS). Check the box on your Academy dues renewal or contact museum@entnet.org.
2. Reserve now for the OHS annual meeting and reception, 6:30 pm-8:30 pm, September 22 in Orlando, FL, at museum@entnet.org.

Academics vs. Private Practice: Who’s Suffering Most?



When I finished my fellowship and joined academics more than a decade ago, I was thrilled with

the opportunity to teach residents, investigate research ideas, and have job security. The challenges of our changing reimbursement system—new quality measurements, RVU-based incentives, diagnostic codes (ICD-10 & ICD-11), and facility fees for my patients—are affecting my hospital-based practice and generating frustration with my choice of academia. Could it be easier in private practice?

Six months ago, while exchanging practice pearls with friends at our state otolaryngology society conference, I heard how private practice is in distress, with the introduction of insurance exchange, increased overhead, EMR expenses, and competition with hospital-based employed otolaryngologists. During this energetic conversation, there was a moment where I felt there may be a growing divide

among otolaryngologists where each user of a certain practice model looks at others as “the lucky ones.”

Having attended the AAO-HNSF and ACS meetings during the last year, I see high frustration among surgeons. The confusion of a novel healthcare system has left many surgeons feeling excluded from decision-making, knee-deep in bureaucracy, and on their way to an early retirement. I sense a growing rift between private practice surgeons and those who are hospital-based. The issue is plain: How can a private practice survive as hospital systems buy out local otolaryngologists to secure their network and patient stream? Can a private practice endure without ancillary diagnostic and OR revenue that a hospital system already generates? While these questions are provocative, I’m not sure they address the bigger question: Can our



Sanjay R. Parikh, MD
BOG Secretary

**Stay alert and connect: bog@entnet.org*

American healthcare system survive without any change?

The American healthcare system, as complex as it is, still yields the greatest surgical innovations and the largest volume of clinical research in the world. Our otolaryngology residency training system is internationally revered as foremost for efficiently and cost effectively covering the entire spectrum of otolaryngology-head and neck disorders. As you already know, the cost of our system per capita is enormous and growing. Unfortunately, surgeons are a targeted group for expense cutting through pending revaluation of CPT codes and quality-based payment restructuring. Fortunately, I am a member of the AAO-HNS, the only group battling at congressional levels for my vocation.

So, as I reflect on my dialogues with colleagues about the frustration of practice, I’m not sure that either private practice or academic surgeons are suffering from a greater disadvantage. We are all faced with mutual adversity and the complexity of a generational movement in our healthcare system. As I look to the future, I will not view my colleagues as a source of frustration, but as my friends to lean on, as we brace together for a rocky road ahead. 



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 that 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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As of June 1, 2014



Annual Meeting Opening Ceremony Service Awardees

2014 Jerome C. Goldstein, MD Public Service Award

Keith F. DeSonier, MD

The Jerome C. Goldstein Public Service Award recognizes commitment and achievement in service, either to the public or to other organizations, when such service promises to improve patient welfare. **Keith F.**



DeSonier, MD, is this year's awardee chosen for promoting public health and his role in passage of patient and physician legislation.

The award criteria might have been designed with Dr. DeSonier in mind—consideration of character, professional excellence and dedication, significant commitment to service, and recognized peer leadership. Dr. DeSonier exhibits all, yet these attributes are overshadowed by his accomplishments.

After receiving his "MD" from Louisiana State University, New Orleans, Dr. DeSonier interned (1976-77) at Tripler Army Medical Center, Honolulu, HI. He followed with residencies in surgery at Darnall Army Hospital, and Brooke Army Medical Center, both in Texas. A residency in otolaryngology at Brooke led to a mini-fellowship in Head and Neck Surgery with Drs. John Conley and Robert Eberle at St. Vincent's Hospital in NY. Dr. DeSonier became an otolaryngology-head and neck surgery residency program instructor at Brooke Army Medical Center. Later as assistant department chief there, he oversaw instruction of military surgeons during Desert Shield/Desert Storm.

This award, marks Dr. DeSonier's commitment to patients and peers by prompting legislation through his role within the Council on Legislation of the Louisiana State Medical Society (LSMS) and the Louisiana Medical Political Action Committee (LAMPAC).

For Dr. DeSonier's dedication and passion to his country, his devotion to his patients and their rights and his reinvention of the Louisiana Academy of Otolaryngology, this award is given.

Distinguished Award for Humanitarian Service

J. Thomas Roland, Jr., MD

The AAO-HNSF Distinguished Award for Humanitarian Service is presented to **John Thomas Roland, Jr., MD**. Each year this honor is given to a member who is widely recognized for a consistent, stable character distinguished by honesty, zeal for truth, integrity, love and devotion to humanity, and a self-giving spirit.



Dr. Roland was a Lt. Commander U.S. Public Health Service at the Fort Yuma PHS Indian Hospital and clinical director (1986-1988). He now is the chairman of the Department of Otolaryngology-Head and Neck Surgery at the NYU Langone Medical Center. His clinical focus is in otology/neurotology and skull base surgery. He is co-director of the NYU Cochlear Implant Center.

During the last 10 years, he has participated in and financially supported many humanitarian trips, particularly to Uganda. There he has taught its residents and built a temporal bone learning lab. Mulago Hospital continues to benefit from returning residents, fellows, nurses, surgical techs, and nurse practitioners he inspired to teach others.

Dr. Roland also regularly travels to Israel to assist with challenging cochlear implant surgeries and helped with development of a Jerusalem Cochlear Implant Center. He has implanted sponsored children at NYU from Guatemala, Trinidad, Nigeria, Uganda, and more recently Kosovo.

When home in New York, Dr. Roland makes home visits and performs some procedures on weekends to accommodate patients' mobility constraints, needs, and their religious restrictions. Dr. Roland embodies all that the American Academy of Otolaryngology-Head and Neck Surgery Foundation Distinguished Award for Humanitarian Services represents.

2014 Holt Leadership Award

Jayme R. Dowdall, MD

The Holt Leadership Award is given to a resident or fellow who best exemplifies the attributes of a young leader—honesty, integrity, fairness, advocacy, and enthusiasm. **Jayme R. Dowdall, MD**, the 2014 Holt Leadership Awardee, has provided extensive volunteer service to the Academy and otolaryngology's resident community, serving the Section for Residents and Fellows-in-Training (SRF) as public relations representative, vice-chair, chair, and immediate past chair. During this time, she received the Adam T. Ross, MD Leadership Excellence Award.



Dr. Dowdall completed her residency at Wayne State University in Detroit where **Robert J. Stachler, MD**, encouraged her to attend the spring AAO-HNS BOG/JSAC meeting. After residency, she continued her training in a laryngology fellowship with **Ramon Franco Sr., MD**.

Since then, she's been an instructor in the Harvard Medical School (HMS) Department of Otolaryngology and medical director of the Voice Program at Brigham and Women's Hospital (BWH). Her specialty involvement was established during her early career when she was elected resident liaison for both the Society of University Otolaryngologists in 2009 and the (CORE) Study Section in 2010.

As the medical director for the Voice Program at BWH since 2012, Dr. Dowdall is focused on performing arts medicine, and the influence of gender on laryngeal disease. Dr. Dowdall's commitment to young otolaryngologists is apparent as the BWH site director for the Harvard otolaryngology residents.

Within the AAO-HNS Dr. Dowdall has been active with the Board of Governors (BOG) and in advocacy conferences, the CORE Study Section, and the Young Physicians Section (YPS).

She is an inspiring leader, and the SRF reaped the benefits of her many years of service.



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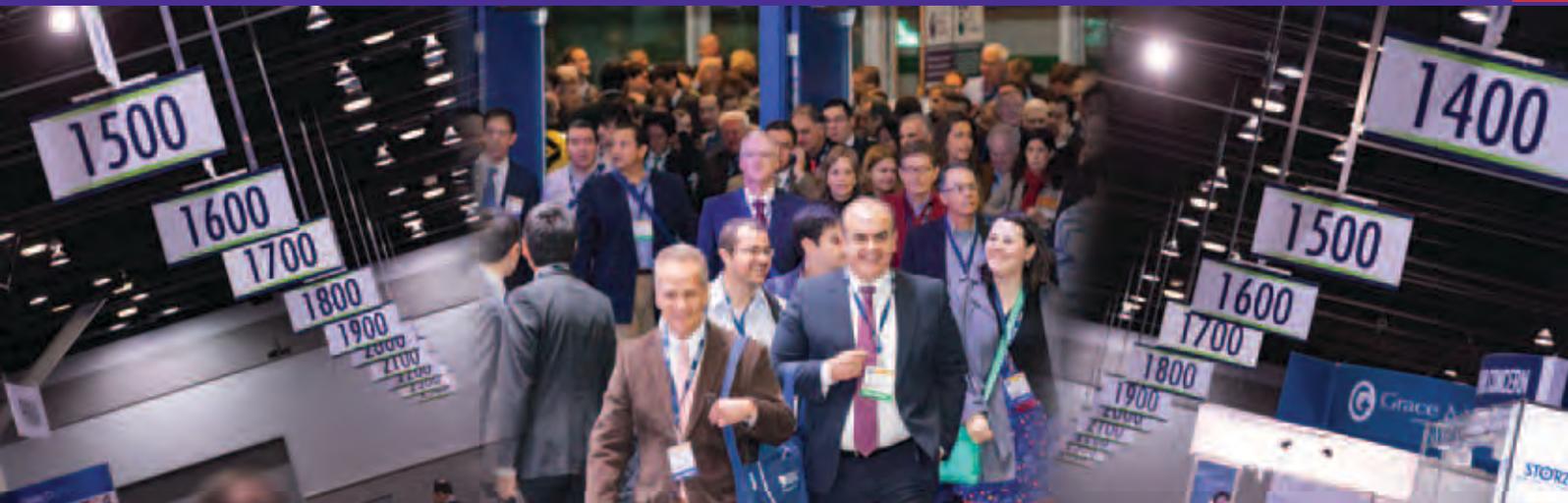
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OTO EXPOSM Is Your Stage for Excellence



The stage is set to welcome you to Orlando, FL, for your AAO-HNSF 2014 Annual Meeting & OTO EXPOSM. This event is tailored to your needs by featuring the most comprehensive display of the latest products and services available for advancing the specialty of ear, nose, throat, head and neck care. Education extends beyond the session rooms to the OTO EXPOSM show floor, where you can find a massive array of innovative tools and services to assist you in your professional growth.

As in past years, the doors will open at 10:00 am on Sunday, September 21, when we expect to observe the familiar rush of conference attendees eagerly entering the EXPO to get their hands on the latest surgical equipment and instruments. That evening we are bringing the popular **President's Reception** to the show floor. This reception honors the outgoing president and it will allow you the opportunity to collaborate with peers and explore the hundreds of companies exhibiting in the hall. Our exhibitors are prepared to share with you products and services such as surgical instruments,

robotic surgical apparatuses, imaging equipment, medical devices, and EMR/EHR systems.

Our brand new **Hands-On Training** sessions will include a two-hour training hosted by various members of the corporate community. These sessions will provide a limited number of Annual Meeting attendees the opportunity to use the newest technologies. Learn how to perform otolaryngologic procedures with today's state-of-the-art technology. All Hands-On Training sessions will include how-to lessons and are sure to add to your Annual Meeting education experience.

To maximize your time, we have changed our food offering by providing you with **Daily Food Vouchers**. There will still be a food court set up in the back of the hall, but instead of having meals available just from 11:30 am to 1:00 pm, this year we will have food stations available during the time the OTO EXPOSM is open, giving you more flexibility.

Making another return will be the **Product Theater** where several of our

corporate partners will be presenting their ENT products during show hours in 30-minute intervals. Be sure to attend these presentations to couple your CME credits with medical devices and product demonstrations by some of our leading manufacturers.

When you come to your Annual Meeting & OTO EXPOSM, be sure to visit the OTO EXPOSM show floor. You'll benefit from new resources and tools that you can put into practice right away. This is your event, your OTO EXPOSM, and your opportunity to gain invaluable experience to help you deliver excellent patient care. 



Visit the Exhibitors' page:
www.entannualmeeting.org/14/oto-expo

2014 Annual Meeting Exhibitors List

As of July 1, 2014

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			Johns Hopkins Medicine Otolaryngology-HNS #1069 www.hopkinsmedicine.org/otolaryngology

SAVE THE DATE!

American Association of Otolaryngologists of Indian Heritage dinner Monday, Sept 21 6:30 -11:30 pm, Hyatt Regency Orlando Hotel, Room Florida A (International Tower.) For details or to reserve: dcmehta@aol.com or 914-953-6495

Kaiser Permanente www.physiciancareers.kp.org/sca	#532	Medioplast AB www.medioplast.com	#861	Pan American Congress of Otolaryngology www.panamorl.com.ar/Ingles/homeingles.htm	#1255	Sontec Instruments Inc. www.sontecinstruments.com	#1203
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KARL STORZ Endoscopy America Inc. www.ksea.com	#820	MedNet Technologies www.mednet-tech.com	#1226	Passy-Muir Inc. www.passy-muir.com	#533	Soredex www.soredex.com	#660
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2014 BOG Candidates: Chair-Elect (Choose one)

Susan R. Cordes, MD

Ukiah, CA



What are your qualifications and what is your experience?

During my more than 10 years of service to the Academy, I have participated on many committees and have chaired and vice-chaired several others. In addition, I have chaired a Section (Women in Otolaryngology), and I completed a term as Member-at-Large of the BOG. As WIO Section chair, I was a non-voting member of the Board of Directors and participated in strategic planning for the Academy. I also serve on the BOG Executive Committee. Locally, I have been president and governor for my regional society, residency program director, and chief of service at a busy urban hospital. I am reliable, conscientious, and have a long history of dedication to otolaryngology and to the Academy. I am confident that my experience in leadership positions and my understanding of the Academy structure and function equip me very well to serve effectively as BOG Chair.

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

As healthcare and practice patterns change, I will ensure our BOG adapts and remains relevant to all otolaryngologists. One major area of concern is the increasing government influence on the practice of medicine. Therefore, on the advocacy front, I will further develop the I-GO and State Tracker programs while continuing attention to other important issues such as SGR, ACOs, scope of practice, ICD-10, and EMR. Because of our grassroots nature, the BOG can enhance member knowledge of Academy products such as guidelines, consensus statements, and quality improvement efforts and explore barriers and solutions to implementation. The regional network plan is now well underway, and as BOG chair, I will capitalize on that program to connect with Academy members. The BOG represents the voices of Academy members regarding these and other important issues, and I will ensure that those voices continue to be heard so that our specialty remains strong and united. 

David R. Edelstein, MD

New York, NY



What are your qualifications and what is your experience?

My qualifications extend over 34 years and include the triad of hard work, common sense, and integrity. My experience in academic practice (as chairman and residency program director at Manhattan Eye, Ear, and Throat Hospital [MEETH] and vice chairman at Lenox Hill Hospital), private practice (as president of Manhattan Otolaryngology), and hospital practice (as chief of otolaryngology at MEETH and chief of nasal/sinus surgery at several hospitals) makes me sensitive to the interests of all otolaryngologists. I have been president of the New York Laryngological Society and the New York Otological Society and served on numerous hospital, institutional research, and medical boards (three as chair).

My Academy service includes working on several committees including the hearing, infectious disease, development, geriatrics, history and archives, SIPAC, BOG Socioeconomic and Grassroots (as chair), BOG Nominating, and BOG Executive Committees. I am a longstanding member of the Millennium Society and Hal Foster Endowment society.

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

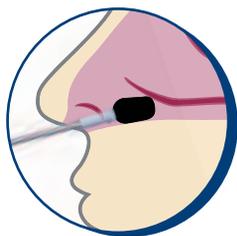
The greatest challenge facing otolaryngology today is physician indifference countered by a confusing national healthcare plan and loss of autonomy as physicians move to hospital employment.

To address these challenges, I would work to develop a fully engaged membership by broadening the Academy's appeal to residents and young physicians, increasing foreign recruitment, and improving outreach to older otolaryngologists (who have experience, time, and resources). I would expand the BOG regional representative system, of which I was a prime architect, reenergize less active state and local societies, and enhance polling of BOG societies to identify members' problems and needs more quickly. I would prioritize organizational efficiencies such as integrating the Academy's regulatory, insurance, and payer advocacy functions. I would focus on educating members to be better advocates within their own medical centers as discussed in my *Bulletin* articles on how to become more effective hospital board, finance committee, and hospital reorganization members. 

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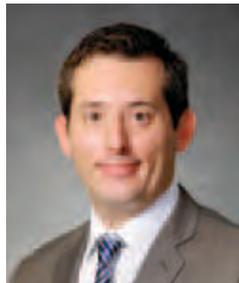
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2014 BOG Candidates: Member-at-Large (Choose one)

Nathan A. Deckard, MD
Philadelphia, PA



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. I have been an active part of the Section for Residents and Fellows-in-Training (SRF) as the vice chair, the information officer/secretary for two terms, and was the representative to the Society of University Otolaryngologists. I have served as a journal reviewer and participated in Clinical Practice Guideline creation. I have also served on both the BOG Socioeconomic and Grassroots and Legislative Affairs committees and have attended the BOG spring and fall meetings for the past six years. These experiences have given me, as a recent graduate, a fairly uncommon understanding of the BOG and the Academy and their strategic plan and goals.

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

If chosen as Member-at-Large, I would prioritize member engagement/retention, with a focus among our young physician and resident sections. As a recent graduate and an involved member of these sections, I feel a particular tie to these groups. I would suggest utilizing the strength of the Young Physicians Section (YPS) and SRF to improve the engagement of their members in the Academy, encourage participation in Academy activities, and educate their members in establishing Academy membership early in their careers. Furthermore, as a specialist, I would like to continue to encourage Specialty Society Advisory Council (SSAC) communications to improve specialty involvement and engagement. Lastly, as a proud PAC member, I support recent efforts to improve resident participation and would work toward furthering this effort and furthermore to educate all of our members in the importance of advocacy with particular focus on the importance of percentage of PAC membership in our specialty. 

Spencer C. Payne, MD
Charlottesville, VA



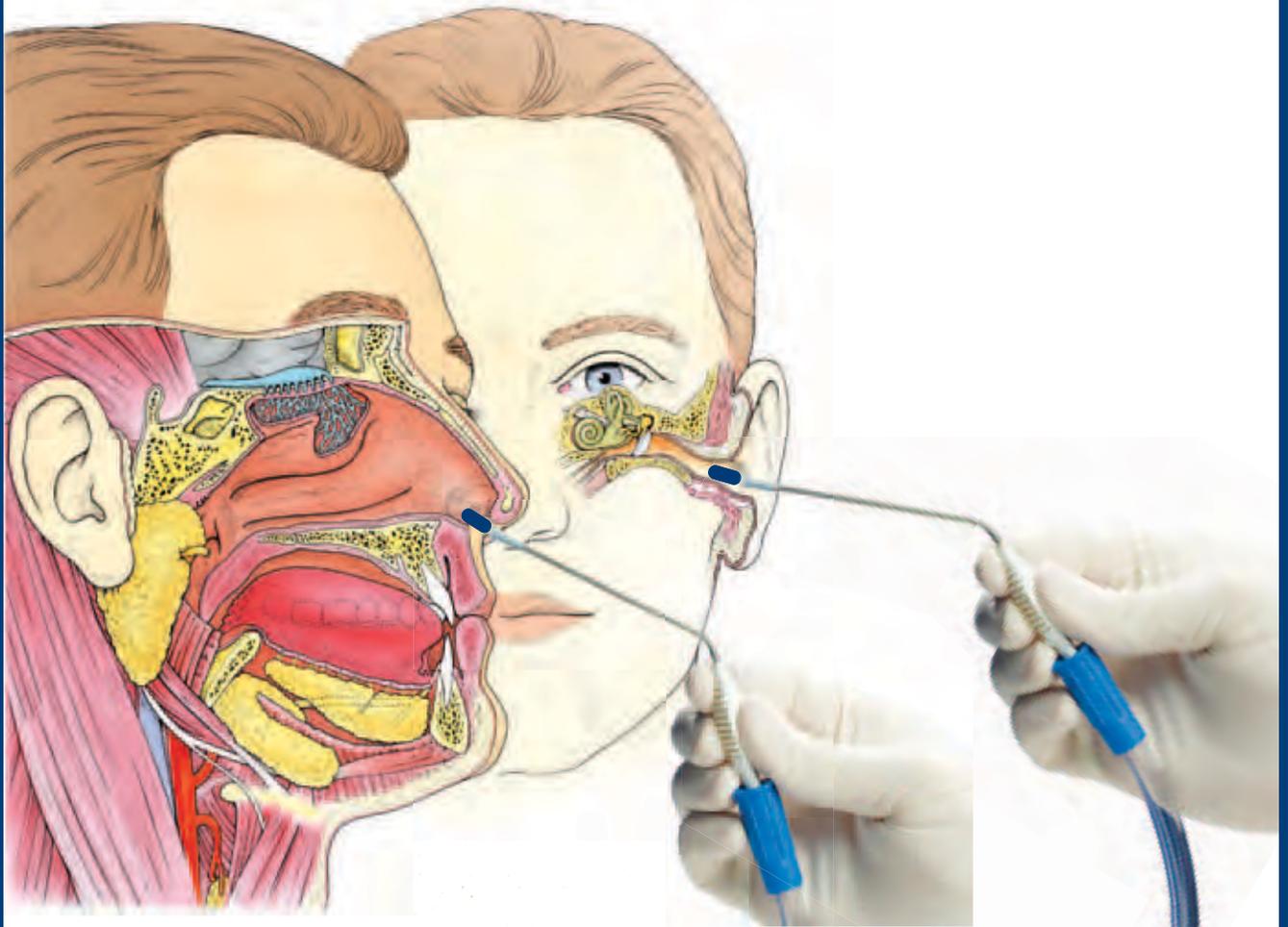
What are your qualifications and what is your experience?

I wrote an article for the *Bulletin* a few years ago titled "Decisions are made by those who show up" and it is by that motto I have lived. My involvement with the Academy spans the last 10 years during which I have served as Informatics officer and chair of the Section for Residents and Fellows-in-Training, member of several Academy committees including Medical Informatics, Young Physicians, Development, and Public Relations, and been the alternate for guidelines development for the ARS. For the past three years I have served as the Governor for the Virginia Society of Otolaryngology-HNS and sat on the BOG Rules and Regulations Committee. Locally for my hospital I serve on the ICD-10, Meaningful Use, and Quality committees. All of these experiences provide me a comprehensive familiarity with Academy, BOG, and the issues that affect practitioners such that I can excel at bridging the three.

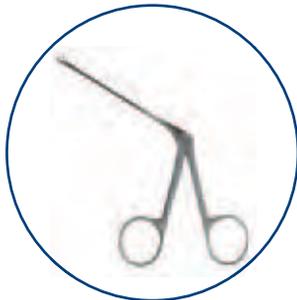
Given the Academy's strategic plan, outline and prioritize your goals for the Board of Governors.

The last few years have seen a regional reorganization of the Board of Governors in order to enhance the bidirectional communication between the Academy and member societies. We need to continue to leverage this infrastructure in order to facilitate the transmission of both the concerns **AND** successes of our members. I will bolster this network and employ the Academy's new website to get the word "out" and "in" so that we can build on each other's accomplishments, focusing on the positives while being mindful to negotiate the changing obstacles of our profession. I would also work closely with the Section for Residents and Fellows-in-Training as well as the Young Physicians Section to better cultivate and harness the enthusiasm with which they can better the specialty. Through mentoring and encouragement we can incentivize our younger membership to stand with us on the shoulders of the giants that have preceded us. 

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2014 BOG Awards Announced

Virginia Society of Otolaryngology-Head and Neck Surgery Receives BOG Model Society Award

The Virginia Society of Otolaryngology-Head and Neck Surgery (VSO-HNS) is the recipient of the 2014 Board of Governors (BOG) Model Society Award.

Spencer C. Payne, MD, governor, **Patrick J. Gibbons, MD**, legislative affairs representative, and **Eric M. Gessler, MD**, socioeconomic and grassroots representative, represent the society on the BOG.

Among their many community-based outreach activities, last September VSO-HNS provided a free screening for head and neck cancer at the Richmond International Raceway prior to a NASCAR event. The event allowed VSO-HNS members to raise awareness of head and neck cancer and its risks, as well as the role of otolaryngologists in the diagnosis and treatment of head and neck cancer. Society members from around the state, including representatives from all four academic departments in the state, participated in the event. A total of 95 individuals were screened, and all individuals were provided with information regarding head and neck cancer risks and the role of the otolaryngologist. If indicated, the individuals were given recommendations for further follow-up or evaluation. Review of the screenings revealed 14 individuals required follow-up: ears (1), skin (1), oral cavity (5), neck (2), throat (2), vocal cords (1), sinus (1), and head (1).

This past February, VSO-HNS representatives were well received by their state legislators. **Cristina Baldassari, MD**, and **Kelley M. Dodson, MD**, met with Delegate Patrick Hope to talk about expanding Medicaid and opening up the HPV vaccine to boys in Virginia. They expressed VSO's interest in mandating the vaccine for boys. Delegate Hope advised he would like to convene a workgroup

with all stakeholders and the Virginia Department of Health. Though VSO, the Medical Society of Virginia, and Virginia Chapter, American Academy of Pediatrics, testified in support, the bill was killed in subcommittee. In April, Dr. Dodson attended the HPV workgroup on how to communicate more effectively to the public the necessity of the HPV vaccine.

BOG Practitioner Excellence Award

The 2014 BOG Practitioner Excellence Award will be presented to **Joseph A. Brennan, MD**, Colonel, Medical Corps, U.S. Air Force, Fort Sam Houston, TX. Colonel Brennan has distinguished himself in the combat casualty care of wounded warriors in both Operation Iraqi Freedom and Operation Enduring Freedom (Afghanistan) as the de facto leader of military otolaryngologists, preparing them properly for the care of combat wounds to the face, head, and neck. Col. Brennan is arguably the most experienced combat head and neck surgeon in the U.S. military today. In his own right, he has cared for many wounded American and Allied military personnel in Iraq and Afghanistan, saving dozens of lives of true American heroes in these wars.

He has brought back the surgical and clinical experience to teach other otolaryngologists to care for combat casualties, and is the lead editor of a military medicine textbook, *Otolaryngology-Head and Neck Surgery Combat Casualty Care in Operation Iraqi Freedom and Enduring Freedom*, which will be the guidebook for future combat care of head and neck wounds. His experience and teaching has already influenced civilian otolaryngologists in improving their care of traumatic wounds through his award-winning Triological Society paper on "Head and Neck Trauma in Iraq and Afghanistan: Different War, Different Surgery, Lessons Learned."

Col. Brennan is also the co-founder and current chair of the AAO-HNS Trauma Committee, which is rejuvenating the importance of trauma care in the practice of otolaryngology-head and neck surgery. Due to his leadership and experience, Col. Brennan was chosen as the chairman of surgery of the San Antonio Military Medical Center, the largest surgical department in the Department of Defense. He was also awarded the Ronald Speirs Award for Combat Medicine at Task Force Med, Bagram Theater Hospital, Afghanistan, October 2009. Col. Brennan is an otolaryngologist among otolaryngologists, and what he has done for combat casualties in Iraq and Afghanistan, as well as his practice of head and neck surgery in the military, deserves the appropriate recognition of Practitioner Excellence Award.

Please join the BOG in honoring VSO-HNS and Dr. Brennan during the BOG General Assembly meeting, Monday afternoon, September 22, in Orlando, FL. 



Joseph A. Brennan, MD, Colonel, Medical Corps, U.S. Air Force, Fort Sam Houston, TX



2014 HOME STUDY COURSE

**Registration deadline
September 8, 2014**



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

Registration fee is based on AAO-HNS membership status at the time form is received. Payment must be received by September 8, 2014, to receive 2014–2015 courses. First packet begins mailing in late August.

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Registration closes September 8, 2014. A \$200 late registration penalty will be applied to all registrations **RECEIVED** after September 8, 2014.

2014 Mid-term Election Landscape Takes Shape

Following an exciting primary election season and with only a couple of months remaining before we head to the polls in November, much of the electoral landscape has taken shape. So, what are we left with? The answer is a handful of competitive races and an extremely interesting struggle for control of the U.S. Senate. Read on for a brief overview of the most competitive—or “toss-up”—federal races this year.*

U.S. House of Representatives

AZ-1 – Incumbent Ann Kirkpatrick (D) won her 2012 election with an unimpressive 49 percent. With a lackluster first election, paired with an expected low turnout in the mid-terms, Kirkpatrick has a tricky road ahead for re-election.

AZ-2 – Rep. Ron Barber (D), who initially made his way to Washington in a special election to replace retiring Rep. Gabrielle Giffords, nearly lost his first full-term election in 2012 to GOP Air Force veteran Martha McSally. Having won that election by less than one percent, McSally may be well-poised to take the seat this year.

CA-7 – Upgraded to a “toss-up” race after an initial rating of “Lean D,” freshman lawmaker Ami Bera, MD, (D) faces Doug Ose (R).

CA-36 – Freshman Rep. Raul Ruiz, MD, (D) was able to win this usually Republican seat in the 2012 elections, but may have trouble keeping it against State Representative Brian Nestande (R).

CA-52 – Redistricting has morphed CA-52 into a fierce battle ground, and Rep. Scott Peters (D) will have a close race against challenger Carl DeMaio (R).

CO-6 – Due to redistricting, CO-6 has essentially become a swing district. After an initial race rating of “Lean R,” pundits upgraded the race to a “toss-up” when former state speaker Andrew Romanoff announced he would challenge incumbent Rep. Mike Coffman (R).

FL-18 – Having defeated then-incumbent Rep. Allen West (R) in a 2012 blockbuster election, Rep. Patrick Murphy (D) may face an equally difficult road to

re-election this year. However, unpredictability in the GOP field, which won’t be finalized until a late August primary, may end up working to Rep. Murphy’s advantage.

FL-26 – Without a top-of-the-ticket name like President Barack Obama to drive turnout, freshman lawmaker Rep. Joe Garcia (D) faces a tough road to re-election this year. However, and like other competitive races, a crowded opposing field may work in this incumbent’s favor.

IA-3 – The retirement of Rep. Tom Latham added to this cycle’s handful of open-seat races, and with it brought an original rating of “Likely R.” However, the long and crowded GOP primary gave Democrat candidate Staci Appel ample time to develop her ground game and resulted in a race rating change to “toss-up.”

IL-10 – Former Rep. Robert Dold (R) will serve as a big challenge to incumbent Rep. Brad Schneider (D).

NH-1 – Having fought her way back to Congress in 2012, incumbent Rep. Carol Shea-Porter (D) looks to earn another consecutive term in this classic swing district. Shea-Porter will face former Rep. Frank Guinta (R) in a third consecutive race, assuming he achieves the GOP nomination in September.

NJ-3 – The retirement of Rep. Jon Runyan (R) adds this district to the list of open seats this year. On paper, Democrats might have a chance at flipping this seat. However, it’s the potential for Republican candidates to self-destruct in this area that deems this as a toss-up race. This open seat could go either way between Tom MacArthur (R) or Aimee Belgard (D).

NY-21 – Following the retirement of Rep. Bill Owens (D) this open seat was labeled a “toss-up” early in 2014. Following crowded primaries for both parties, the field is now set with GOP candidate Elise Stefanik facing Democrat Aaron Woolf in November.

WV-3 – Despite President Obama’s absence on the ballot this cycle, Rep. Nick Rahall (D) will still have a hard time holding off state Sen. Evan Jenkins (R).

U.S. Senate

Alaska – First term Sen. Mark Begich (D) faces a tough re-election as a Democrat in a heavily Republican state. After winning his seat by just 48 percent last cycle, he is expected to have the same challenges in this election. The Republican candidate will be determined in an August 19 primary.

Arkansas – Sen. Mark Pryor (D) has thus far enjoyed relatively easy roads to reelection. However, the atmosphere in Arkansas is changing, and not in his favor. As the state becomes more conservative, Pryor may have a tough time holding back opponent U.S. Rep. Tom Cotton (R).

Colorado – At first, it looked as though Sen. Mark Udall (D) would have an easy re-election. However, recent polls following the candidacy announcement of Republican challenger U.S. Rep. Cory Gardner show this will be a much tighter race than previously expected.

Georgia – Open seat race due to the retirement of Sen. Saxby Chambliss (R). Following a protracted primary race that resulted in a run-off, U.S. Representative Jack Kingston (R) was finally named the Republican nominee in July. Points of Light CEO, Michelle Nunn, is the Democrat nominee. Despite Georgia’s status as a “red” state, Democrats have made good on their word to work hard to ensure the open seat remained competitive.

Kentucky – One of the most talked about races this year is the very tight battle between Senate Minority Leader Mitch McConnell (R) and his Democratic opponent Allison Lundergan Grimes. McConnell handily defeated his primary opponent, but Grimes definitely poses a greater threat in the general election. Polling has shown this is going to be a close fight.

Louisiana – Senator Mary Landrieu (D) has had to continuously work to hold her seat, and this term proves to be another battle. In Louisiana’s open primary system, all candidates appear on the ballot on Election Day. If no one achieves 50

I-GO: Celebrating through Action

Last summer, the AAO-HNS rolled out its In-district Grassroots Outreach (I-GO) program to provide Academy members increased opportunities to meet with their federal legislators without the time-consuming and expensive travel to Washington, DC. As expected, the program was enthusiastically embraced by many of our members, which resulted in a successful first year.

AAO-HNS members nationwide met with their federal legislators (and even some state lawmakers) at community picnics, town halls, personal residences, Congressional district offices, and medical practices. These elected representatives had the opportunity to hear from their constituents (aka voters) on a number of the specialty's

legislative priorities, including repealing the Sustainable Growth Rate formula, restoring Graduate Medical Education funding, protecting patient safety by ensuring an appropriate scope of practice for providers based on their training and education, and preserving the term "physician" for MDs and DOs.

The Academy wants to celebrate the anniversary of this program by making this August the most successful month of I-GO events yet! Connect with your legislators as they crisscross their districts hosting town halls, fundraisers, and attending worksite visits. Or better yet, invite them to visit your medical practice and meet your staff. Email govtaffairs@entnet.org to learn more about the I-GO program and to request help in scheduling your meetings for the August Congressional recess! [b](#)



BOG Chair Peter Abramson, MD, and U.S. Representative Tom Price, MD, at an I-GO event in Georgia.

percent of the vote, the contest is decided in a two-way run-off. To date, U.S. Rep. Bill Cassidy, MD, (R) is considered Landrieu's most viable opponent.

Michigan – Open seat due to the retirement of Sen. Carl Levin (D). Michigan usually trends toward electing Democrat candidates, but U.S. Rep Gary Peters (D) is proving to have a tough time against opponent Terri Lynn Land (R). Land has managed to keep herself relevant in this race via excellent fundraising.

North Carolina – In her first bid for reelection, incumbent Senator Kay Hagan

(D) faces a tough race from challenger Thom Tillis (R), the current Speaker of the North Carolina House of Representatives. This race is broadly considered one of the most competitive of the cycle.

For more information about this year's mid-term elections, visit our "Elections" webpage at www.entpac.org (log-in using your AAO-HNS Member ID and password). You can also view the list of ENT PAC-supported candidates/incumbents on the ENT PAC webpage. [b](#)

*Race ratings are attributed to the Cook Political Report.

State Legislative Sessions Wind Down

With most of the 2014 state legislative sessions now complete, the AAO-HNS thanks its member-volunteer "state-trackers" for their stellar job in monitoring legislative issues important to otolaryngology—head and neck surgery. However, it's never too early to begin preparations for 2015. Join the growing team of AAO-HNS state-trackers by contacting the Government Affairs team at govtaffairs@entnet.org.



The countdown to this year's mid-term elections has officially begun, with many exciting primary races having already concluded. ENT PAC, the political action committee of the AAO-HNS, financially supports federal Congressional candidates and incumbents who work to advance the issues important to otolaryngology—head and neck surgery. **Since your AAO-HNS annual dues cannot be used for political purposes**, ENT PAC was established to accept voluntary contributions enabling our members to speak with a collective voice. ENT PAC is a non-partisan, issue-driven entity that supplements the Academy's legislative advocacy efforts and helps to increase the visibility of the specialty on Capitol Hill. To learn more about ENT PAC, visit our PAC website at www.entpac.org (log in with your AAO-HNS ID and password) or email entpac@entnet.org for assistance.

The countdown to this year's mid-term elections has officially begun, with many exciting primary races having already concluded. ENT PAC, the political action committee of the AAO-HNS, financially supports federal

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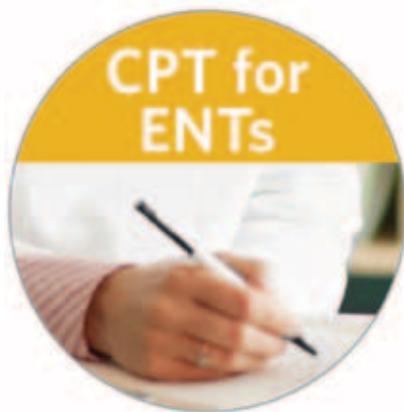
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CPT for ENT: Coding for Flexible Laryngoscopic Procedures



Q: How do I code for percutaneous laryngeal injections using flexible endoscopic guidance?

A: Percutaneous laryngeal injections performed using flexible laryngoscopy for guidance and needle placement should be reported using the unlisted laryngeal code 31599. In this setting, 31599 includes both

the injection and the flexible laryngoscopy. Depending on which material is injected, you might be able to separately report the material with a HCPCS J code. CPT codes 31570 and 31571 are used to report injections performed using rigid, direct laryngoscopy and are not appropriate to use for injections performed using either flexible fiberoptic or flexible distal-chip endoscopic guidance.

Q: What if the laryngeal injection is done through the flexible scope?

A: Injections performed through the operating port of a flexible fiberoptic or flexible distal-chip laryngoscope are reported using the unlisted laryngeal code 31599. CPT Codes 31570 and 31571 are used to report injections performed using rigid, direct laryngoscopy and are not appropriate to use for injections performed using either flexible fiberoptic or flexible distal-chip endoscopic guidance.

Q: Is flexible laryngoscopy using a distal-chip scope also coded with 31575-31578?

A: Yes. While the optics and video sensor of a distal-chip flexible laryngoscope are different from (and generally superior to) those of a standard fiberoptic laryngoscope with attached video camera, the technique and physician work involved using the two instruments is identical. Hence, 31575-31578 are used to report flexible laryngoscopy performed using either a fiberoptic (with naked eye or video observation) or distal-chip flexible laryngoscope.

The CPT for ENTs are AAO-HNS perspectives and opinions, but are not meant to serve as the absolute and only coding authority. Without the benefit of seeing the patient and the medical record, comments are opinion and guidance only. This is not intended to be a substitute for the judgment of the treating physician.

For more AAO-HNS CPT for ENTs, visit <http://www.entnet.org/?q=cptENT>. **b**

www.entnet.org/coding

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*This workshop will be ICD-10 for Friday and CPT Coding on Saturday.
No Revenue Cycle Course on Friday for this location.

For updates check: <http://www.entnet.org/coding>

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Imaging Committee Update

Gavin Setzen, MD, Chair

Jenna Kappel, MPH, MA
 Director, Health Policy and Staff
 Liaison, Imaging Committee

The following is an update on the continued efforts of the Imaging Committee on the behalf of members.

AAO-HNS Imaging Committee Members Take on Leadership Roles at Imaging-Related Societies

- The Intersocietal Accreditation Commission (IAC) CT Division (IAC-CT)

As a follow-up to the Academy's submission of several nominees for the open seat on the Intersocietal Accreditation Commission (IAC) CT Division (IAC-CT), **Rakesh Chandra,**

MD, from Northwestern University Feinberg School of Medicine, and Imaging Committee member, has been elected to the IAC CT board of directors. The CT board was impressed by Dr. Chandra's level of expertise and knowledge and looks forward to working together to help further the mission and importance of IAC accreditation.

- The American College of Radiology Appropriateness Criteria® (AC) Expert Panels on Neurologic Imaging

The ACR Committee on Diagnostic/Interventional Appropriateness Criteria invited AAO-HNS to select a new representative on the American College of Radiology Appropriateness Criteria® (AC) Expert Panels on Neurologic Imaging. To note, AC are evidence-based guidance used by providers in making the most appropriate imaging or treatment decision for a specified medical condition. The ACR feels the expertise of AAO-HNS members contributes to producing

stronger, more relevant recommendations. The AAO-HNS greatly appreciates the opportunity to participate in the process of reviewing and updating relevant AC to otolaryngologists.

In June, **David Conley, MD,** replaced **Brian Nussenbaum, MD,** as an AAO-HNS representative to the ACR AC Expert Panel on Neurologic Imaging. We greatly appreciate all the time and effort that Dr. Nussenbaum has given during the past several years in this role. Dr. Conley will work with the panel to develop and update topics for select neurological conditions.

National and State Efforts Related to the In-Office Ancillary Services Exception (IOSE)

- Physician Community Urges Congress to Preserve Stark Law Exemption

On a national level, on March 18, the AAO-HNS joined the Coalition on Patient-Centered Imaging (CPCI) in sending a letter to Congress urging preservation of the in-office ancillary services exception (IOASE) to the Stark law and rejection of the Administration's



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<p>ICD-10 Implementation Delayed but Not Eliminated <i>AAO-HNS Urges Continued Preparation</i></p> <p>Monday, Sept 22</p> <p>10:30-11:50 am Room 203, OCCC</p> <p><i>Receive tips for developing a timeline moving forward to ICD-10 implementation and learn about AAO-HNS resources to help members comply with new requirements and avoid claim denials.</i></p> <p>For ICD-10 transition resources, visit: http://bit.ly/entICD10</p>	<p>Alternative Payment Models and Academy Advocacy for Future Physician Payment</p> <p>Wednesday, Sept 24</p> <p>10:30-11:50 pm West Room 414CD, OCCC</p> <p><i>Supported by the Physician Payment Policy (3P) Workgroup</i></p> <p><i>Learn about our Academy's efforts, specifically 3P and the Ad Hoc Payment Model Workgroup, to prepare members for the implementation of the Affordable Care Act, and provide the tools to participate in diverse payment plans such as bundled payment systems and quality and payment initiatives.</i></p> <p>Visit the AAO-HNS webpage on Payment Reform: www.entnet.org/payment-reform</p>	<p><i>Extend Your Day to Catch this Valuable Session!</i></p> <p>Other related Miniseminars you don't want to miss:</p> <p><i>Before the 3P Miniseminar, mark your calendars to plan to attend:</i></p> <p>Patient Satisfaction Charm School: Understanding and Improving Scores in Otolaryngology Wednesday, September 24 8:00-9:20 am West Room 414AB, OCCC</p> <p>E&M Coding and Documentation for Proper Reimbursement Monday, September 22, 2014 3:00-4:00 pm West Room 305</p>
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budget proposal to restrict the IOASE. Leaders of the Senate Finance, House Ways & Means, and Energy & Commerce Committees received the letter. To view the letter, visit the Imaging Services web-



Gavin Setzen, MD, meeting with U.S. Representative Paul Tonko (NY -20) during an I-GO visit.

page at <http://www.entnet.org/content/imaging-services>.

■ State Advocacy Efforts in California Lead to Defeat of Bill to Remove Stark Law Exemption

At a state level, in April the AAO-HNS was approached by the CPCI regarding a sign-on letter opposing California Senate Bill 1215, which would have removed the exemption for in-office advanced imaging. The Academy's Government Affairs team moved quickly to receive support from the California Otolaryngology Society and San Diego Academy of Otolaryngology, as well as the AAO-HNS to sign on to

the opposition letter. The California Medical Association also took action to oppose the bill. Thanks go to Board of Governors and California Otolaryngology Society lead-

ers **Marci Bothwell, MD, Christopher Bergeron, MD, and Steven Kmucha, MD, JD,** for their local advocacy efforts. As a result of these actions, SB 1215 was defeated in the California Senate Business, Professions and Economic Development Committee and it is dead for the year.

AAO-HNS Submits Comment Letters to Private Payers Regarding Restrictive Policies

The Academy's Health Policy team worked with the Imaging Committee and coordinated with the IAC to submit comments to Coventry/National Imaging Associates (NIA), Humana, and Blue Cross Blue

Shield of Idaho opposing their policies that restrict the use of mini-CT scans and/or limit the ability for otolaryngologists to interpret and provide imaging services. The letters incorporate language from AAO-HNSF's position statement on point-of-care imaging to support providers who utilize point-of-care imaging when medically necessary and appropriate, in order to improve efficiency in diagnosing and managing a patient's condition.

In addition, in response to Humana's request for additional evidence in specific criteria where computer assisted navigation is needed, comments were submitted to Humana's Medical Director with updated references added to the AAO-HNS/F position statement on Intra-Operative Use of Computer Aided Surgery. While their medical policy on Computer Assisted Surgical Navigation (CASN) currently does not provide payment for the service, Humana stated that they are willing to review any new information provided on this topic. While we are hopeful that these policies will be changed to allow for coverage, the Academy is appreciative of the open channels of communication with these payers. **b**



What is Partners for Progress?

AAO-HNSF Partners for Progress is a group of physician practices that provide philanthropic support to the mission of AAO-HNSF.

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Determining Education Gaps and Needs in Continuing Professional Development

In order to ensure that our education activities address physicians' real-world practice needs, the Foundation must identify the education needs (knowledge, competence, or performance) that coincide with the professional practice gaps of our learners. A Gap Analysis process is underway that will determine key topics for future Foundation education activities. The Gap Analysis answers the overall question "Why is this topic important to our members?"

The AAO-HNS Foundation's Continuing Professional Development (CPD) mission states: We will enhance the quality of patient care and remain the premier source of otolaryngology education and knowledge. We will deliver resources and education activities that address gaps in care and improve the knowledge, competence, and practice of otolaryngologist-head and neck surgeons, residents, medical students, non-otolaryngologist physicians, allied healthcare professionals, and the public.

As an ACCME-accredited continuing medical education (CME) provider, the Foundation is required to comply with several accreditation criteria. According to these criteria, the Foundation's CME activities must be designed to change physicians' competence or performance, and/or patient outcomes. The simplest way to describe a professional practice gap is the difference between "what is current practice" and "what should be optimal practice."

The Foundation requires an organized and thoughtful assessment of the target audiences' practice gaps and education needs. Foundation staff coordinates with the Education Steering Committee and the Annual Meeting & OTO EXPOSM Advisory Committees to review, clarify, and determine the critical practice gaps to address in the annual education work plan.

The Foundation utilizes a planning process that links identified professional practice gaps and education needs with expected outcomes (knowledge, competence, performance, or patient outcomes) in its provision of CPD activities. This analysis data is incorporated into the planning of all education activities. This process utilizes the ACCME model for CPD for physicians, which shows a cyclical process that includes:

- Begin with question in practice—data, information, analysis, synthesis, judgment
- Gain new knowledge—wisdom, strategy
- Develop new strategy to ultimately apply to practice
- Physician competence in practice
- Physician performance



The eight Education committees, under the leadership of **Sonya Malekzadeh, MD**, and the Education Steering Committee are currently completing a formal Gap Analysis. This is critical to ensure we are offering the best education resources that focus on improved professional practices and patient outcomes. [b](#)

Education Gap Analysis and Needs Assessment Algorithm

TOPIC:

A concept involving diagnosis, management, or treatment principles or techniques that a clinician would benefit from learning.

Practice Gap:

A measure, related to the topic, that demonstrates a difference between current practice and ideal practice.

Each topic may have multiple practice gaps.

Education Need:

The education intervention needed to close the practice gap, usually articulated in terms of knowledge, competencies, or performance.

Each gap is likely to have multiple related needs.

Education Intervention:

The education activity offered that will address the education needs that will close the practice gaps.

Outcomes:

What the audience will be able to do differently as a result of their involvement in the education activity.

Evaluation:

The measure of success of the activity related to the practice gaps, education needs, and outcomes.



Visit entnet.org/bulletin
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versions of these stories.

Cameroon: A Model of Sustainability

*Daniel Q. Sun, MD
Humanitarian Travel
Grant Awardee*

It was the dry season in Cameroon, and a fine red dust followed us from the south, where we landed, to the northwest—a place called Mbingo, situated in the mountains that we would call home for the next two weeks. By working at the Mbingo Baptist Hospital (MBH), our mission was to provide otolaryngologic and, specifically, head and neck surgical training to general surgery residents there.

Shortage of health professionals is a pervasive problem in developing countries and subspecialty care is almost non-existent.

General surgeons are called upon daily to do everything under the sun, from drilling burr holes for evacuation of a subdural hematoma in one patient to a C-section in another. Our team, led by **Wayne Koch, MD**, of Johns Hopkins, has established a longitudinal partnership with the general surgery residency program at MBH and Everistus Acha, MD, a Cameroonian otolaryngologist, to provide head and neck surgical training to general surgery residents training at MBH. During the course of two weeks, we worked with Steve Kyota, MD, who is a general surgery resident in his third year of training, to perform nearly 40 operations, including five mandibulectomies, five maxillectomies, and 11 thyroidectomies.

While it was gratifying to put our technical expertise to work, the greater influence lies in our ability to transfer our expertise into the hands of people like Dr. Kyota, who will hopefully go



Conducting an otitis media with effusion screening study at a local elementary school.

on to serve the communities around him. Indeed, during our short time there, his progress in gaining a more in-depth appreciation for the anatomy, soft tissue skills, and principles of head and neck surgery was evident. In addition, we delivered educational lectures on airway management and physiological principles of hearing and balance. Dr. Acha's expertise also allows us to be confident that we are leaving our post-operative patients in good hands, with an expert who will be able to monitor their progress and treat complications that arise.

For young physicians in training such as myself, such a trip makes for a profound experience in personal and professional development, as I look outward at the inspirational community of people that have gathered in a beautiful village in the northwestern mountains of Cameroon to meet the challenges of building a healthcare system, and inward

at what my patients have taught me about the indomitable human spirit and dignity that are at the core of my profession. [b](#)

Trip information:

Name of training program: Department of Otolaryngology–Head and Neck Surgery, Johns Hopkins University School of Medicine

Mission to: Mbingo, Cameroon

Date of travel: February 6-21, 2014

Sponsoring organization: Department of Otolaryngology–Head and Neck Surgery, Johns Hopkins University School of Medicine, AAO–HNSF Humanitarian Travel Grant, Cameroon Baptist Convention

Supervising otolaryngologist: Wayne M. Koch, MD

Local contact and hospital: Dr. Everistus Acha, Mbingo Baptist Hospital

REI/AAO-HNSF Humanitarian Trip to Ho Chi Minh City, Vietnam

Stanley W. McClurg, MD
Humanitarian Travel Grant Awardee

Five patients in the examining room at the same time, extreme emphasis on footwear, but not so much on sterile instruments. These were some of the culture gaps I observed on a recent medical humanitarian trip to Ho Chi Minh City, Vietnam. On the plus side: We all got a tea break right before surgery.

As a rhinology, endoscopic skull base, and allergy fellow at the University of North Carolina, I travelled to Vietnam February 28 through March 8 with a group under Brent Senior, MD, as part of REI Vietnam. We worked at multiple hospitals there and I was able to give presentations to the physicians on sinus surgery and my research on fluid dynamics of the nasal airway. It was a great opportunity for me to teach and also to see a different perspective on ENT and rhinology practices in another country.

I personally performed four sinus surgeries, and one endoscopic pituitary surgery with my neurosurgery colleagues who went along with us on this trip. These included mostly endoscopic sinus surgery procedures for mucocoeles, chronic sinusitis, nasal polyposis, septal deviation, and pituitary adenomas.

I brought some of my own sinus instruments, but overall, they had most of the appropriate instruments that were needed for sinus surgery. The monitors, facilities, and beds, however, were not optimal. The sterility practices were fairly odd, placing extreme emphasis on footwear, and not so much on actual sterile techniques for instruments. I do feel, though, that the overall care that is being given at these hospitals is adequate, and at times superior to practices in the United States. There is a large emphasis placed on seeing as many patients as possible



Dr. Chan and Dr. McClurg in the OR at Ghia Ding hospital.

there. I left feeling my experience there had a true impact on the physicians that I worked with. Many doctors were able to see me do sinus surgery, and learned many different and new techniques.

I do feel that future focus on neurosurgical interventions would be beneficial for the people of Vietnam. Many of the ENT physicians there had never had any experience with endoscopic pituitary surgery, and this is an important area to address in future endeavors. **B**

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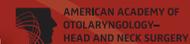
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Children's Hospital is a 247-bed, not-for-profit medical center offering the most advanced pediatric care for children from birth to 21 years. It is the only full-service hospital exclusively for children in Louisiana and the Gulf South. Critical care is provided in the hospital's 36-bed NICU, 24-bed PICU, and 20-bed CICU.

Our faculty members benefit from cross-coverage arrangements for weekend and holiday on-call responsibilities and share the benefit of subspecialty support in otology, laryngology, head and neck oncology, and plastic/reconstructive surgery for complex patients.

New Orleans offers many of the amenities of larger cities but continues to maintain a small town family oriented atmosphere. New Orleans is also one of the most culturally diverse and fastest growing cities in the country, and residents can easily enjoy either an urban or outdoor and coastal lifestyle.

Salary and rank will be commensurate with the knowledge, education and experience of the individual. Candidates interested in working within a dynamic and stimulating setting combined with a generous package of related benefits are encouraged to provide a cover letter with clinical and research interests and current Curriculum Vitae to: **SOM-Jobs@lsuhsc.edu**; reference **Pediatric Otolaryngologist**. The School of Medicine does not participate in sponsoring faculty candidates for the Department of Health and Hospitals' Conrad 30 Program.

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Located in the upscale community of Farmington Hills this 5 physician SSG is looking to enhance the practice with the addition of 3 new associates. An ENT Allergist, a Head & Neck Surgeon and an Neurotologist, all with fellowship training. The practice was founded 75 years ago and in addition to the main clinic they have two suburban offices. Close to hospitals and surgery centers the offices all offer modern and up to date equipment and a well trained staff Well managed practice with below average overhead and expenses. The practice will offer a Partnership track opportunity, competitive salary with health care benefits, life insurance, and IRA.

Send CV to Carl Sivia at carlsivia@gmail.com or fax to 636-272-1718

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 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

At ENT and Allergy Associates®, LLP, we specialize in turning residents and fellows into successful private practitioners.

ENT and Allergy Associates—with over 40 state-of-the-art clinical sites located in growing communities across New York and New Jersey—understands just how difficult it is to make the right choice when graduating from the study of medicine into the practice of medicine.

To help, we're holding dinners where you can meet fellow physicians, listen to insights about the practice of otolaryngology and its related fields, and most importantly, ask questions. **Here's to a bright future...YOURS!**

For more information, please contact:

Robert P. Green, MD, FACS

President, ENT and Allergy Associates
rgreen@entandallergy.com

Bob Glazer

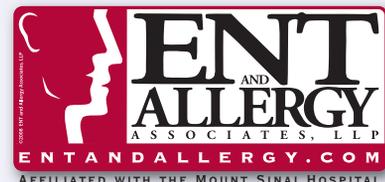
CEO, ENT and Allergy Associates
914-490-8880 • rglazer@entandallergy.com

This year's dinner topic will be:

► **Practicing Otolaryngology in the 21st Century**

Our dinner schedule for 2014 is:

- **Boston, MA**
- **Chicago, IL**
- **Philadelphia, PA**
- **Washington, DC**
- **New York City, NY**
- **Albany, NY**



ENT OPPORTUNITIES IN NEW JERSEY



Coastal Ear, Nose and Throat, a premier single-specialty group on the New Jersey shore, seeks well-trained Otolaryngologists to join their expanding practice, located just an hour from NYC.

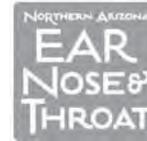
Opportunities exist for both a General Otolaryngologist and a Neurotology subspecialist. Utilize your surgical skills in a modern practice with strong patient demand and an outstanding community reputation. Look forward to state-of-the-art surgical facilities, generous compensation and benefits, and an attractive coastal community.

For more information, please contact:

Courtney Becker
800-678-7858 x64401
cbecker@cejkasearch.com

ID#151345AD

cejkasearch.com



We are recruiting a second FT or PT general otolaryngologist (BC/BE) for our successful ENT practice located in Flagstaff, Arizona.

Our practice is well established and expanding to better serve Flagstaff and surrounding communities.

Practice Highlights

- Busy, ready-made practice with a strong referral base
- One hospital affiliation
- Dedicated suite in our ASC
- Audiology on site
- 1:5 call schedule for hospital
- EMR (Athena)
- Competitive Salary and Benefits
- Flexibility for balance of work and lifestyle (4 day week, P/T, etc.)
- Cohesive office staff dedicated to providing the best medical care

Nestled at the base of the San Francisco Peaks, Flagstaff has the charm of a small town with the diversity, schools and opportunities of a big city. It is a recreation destination for all seasons. The home of Northern Arizona University, Flagstaff is the hub of many of the state's natural attractions, including the Grand Canyon, Lake Powell, Snowbowl Ski Resort and Sedona, with an easy two hour drive to Phoenix.

Interested applicants are welcome to send a CV to:

Northern Arizona Ear, Nose & Throat, PC
Dr. Daniel Downs
1300 Rim Drive, Suite B, Flagstaff, AZ 86001
Fax: 928 556 0336 • flagstaffdowns@gmail.com • NAENT.COM

Central Coast California

Fantastic job opportunity in a wonderful place to live.

GREAT PRACTICE AND INCOME

We are looking for a full-time otolaryngologist with subspecialty expertise to join a busy, well established otolaryngology office in Santa Maria, California.

The ideal candidate would have some subspecialty training and experience as our area is underserved in the subspecialties of otolaryngology. Special skills in otology/neuro-otology, head and neck cancer surgery or sinus surgery would be especially desirable. We need someone who is comfortable with most aspects of otolaryngology and who is willing to take some otolaryngology call.

Compensation package includes guaranteed salary with incentive, paid vacation, educational leave, and retirement plan.

EXCELLENT WORKING ENVIRONMENT

We have an exceptional, supportive staff which includes a physician's assistant, audiologist and respiratory therapist. Our office offers the full spectrum of audiological services including ABR, VNG, OAE, audiograms, dispensing hearing aids, and newborn/infant hearing testing. As part of our medical office, we also have an AASM accredited sleep lab.

The new, state of the art Marian Regional Medical Center is just across the street from our office.

IDEAL WEATHER – GREAT PLACE TO LIVE

This area is rated as one of the four "happiest places in the world to live" by National Geographic explorer and best-selling author Dan Buttner!

Besides having an unspoiled, idyllic natural environment, the central coast has an ideal climate. The *Places Rated Almanac* designated it as having the best climate in the nation, with a perfect score of 100.

Santa Maria is a safe, medium-sized, community (100,000 with 200,000 draw area) on the beautiful central coast of California in Santa Barbara County, about 3 hours north of Los Angeles and 4 hours south of San Francisco.

Just outside of Santa Maria, there are several desirable residential communities within a short driving distance from our office including: Nipomo, Orcutt, Arroyo Grande, Pismo Beach, Shell Beach, Avila Beach and San Luis Obispo.

ENJOY AN ACTIVE LIFESTYLE

The natural area of the Central Coast is unsurpassed in the quality and the variety of recreational activities available including: biking, hiking, surfing, kayaking, golf, boating, wine tasting, horseback riding and other outdoor and cultural activities.

Interested candidates should contact **Richard P. Wikholm MD, MS, FACS**
rpwmdcco@gmail.com • 805-614-9250 (office)

THE UNIVERSITY of TENNESSEE 
HEALTH SCIENCE CENTER

Pediatric Otolaryngologist - We are seeking a fellowship-trained, board eligible/certified individual to join a high-volume practice. This position will be recruited at the Assistant/Associate Professor level. It is an excellent opportunity for a Pediatric Otolaryngologist interested in academic growth and excellent clinical experience.

Candidates must be able to obtain a Tennessee medical license.

Letters of inquiry and curriculum vitae should be sent to:

Jerome W. Thompson, M.D., MBA, Chairman
Department of Otolaryngology-Head and Neck Surgery
The University of Tennessee Health Science Center
910 Madison Avenue, Suite 408
Memphis, TN 38163

Or email to: jkeys@uthsc.edu

The University of Tennessee is an EEO/AA/Title VI/Title IX/Section 504/ADA/ADEA institution in the provision of its education and employment program and services.

Private Practice

North Carolina

Busy single-specialty ENT private practice is currently seeking a Board Certified/Board Eligible otolaryngologist to join the practice in 2015 or 2016. The practice focuses on quality care and an excellent patient experience at our well-equipped center.

Our practice is the Otolaryngology Head & Neck Surgery academic department for the Brody School of Medicine at East Carolina University. Ownership interest in SurgiCenter and numerous academic and clinical programs are available at our 900-bed tertiary teaching hospital. With a long-standing practice, there is a broad referral base and great opportunity for the newly joining physician. Head and neck fellowship is desired but not required.

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

Please send letter of inquiry to:

Office Manager
Eastern Carolina Ear, Nose & Throat - Head & Neck Surgery, PA
P.O. Box 5007
Greenville, NC 27835



University Hospitals

General Otolaryngologist Opportunity

University Hospitals Medical Practices was established in 1994 and has become the largest primary and specialty care physician group in northeastern Ohio. With a physician complement of over 500 physicians, University Hospitals Medical Practices covers an eight county area from Conneaut to Sandusky to Medina. This diverse medical practice group consists of allergy, cardiology, endocrinology, family medicine, gastroenterology, general surgery, geriatrics, pediatrics, internal medicine, neurology, obstetrics/gynecology, ophthalmology, orthopaedics, otolaryngology, pediatric ophthalmology, pediatrics, physical medicine/pain management, podiatry, pulmonary medicine, rheumatology and urgent care.

The University Hospitals Ear Nose and Throat Institute is rapidly expanding throughout Northeast Ohio. As part of the Institute the University Hospitals - Case Western Reserve University Department of Otolaryngology-Head and Neck Surgery has most recently risen to #18 in the country as ranked by US News & World Report. University Hospitals Medical Practices (UHMP) is seeking a general otolaryngologist to join our team in the northeastern region of Ohio. This position will be part of the UH Ear, Nose and Throat Institute and will work in partnership with a diverse and subspecialized ENT team.

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 should forward a current CV to: Kimberly.Kuivila@UHhospitals.org

Candidates may also mail CV to:

Cliff A. Megerian, MD
Julius W. McCall Professor and Chairman
The Richard W. and Patricia R. Pogue Chair
c/o Kim Kuivila
11100 Euclid Avenue
Mailstop LKS5045
Cleveland, OH 44106



LSU Health New Orleans

School of Medicine

Director of Pediatric Otolaryngology **Assistant Professor, Associate Professor, or Professor (Non-Tenure, Clinical Track)** **Anticipated Vacancy**

The Department of Otolaryngology-Head and Neck Surgery of the LSU Health Sciences Center is actively seeking an experienced, board certified Pediatric Otolaryngologist to serve as Director of its growing Pediatric Otolaryngology division. This position will carry a full-time university faculty appointment at the rank of Assistant Professor, Associate Professor, or Professor (non-tenure, clinical track); appointment rank will be made commensurate with academic achievements and experience.

This is an outstanding opportunity to join a growing practice in a thriving department and a wonderful city. Children's Hospital of New Orleans, the principal site of this practice, is a 247-bed, not-for-profit medical center offering the most advanced pediatric care; it is the only full-service hospital exclusively for children in Louisiana and it also maintains busy outpatient and community outreach clinics. Critical care is provided in the hospital's 36-bed NICU, 24-bed PICU, and 20-bed CICU. The medical staff includes 40 pediatric specialties and more than 400 physicians.

Responsibilities include serving as Director of a growing Pediatric Otolaryngology practice that is currently composed of three pediatric otolaryngologists, with an institutional commitment for hiring two more in the next two years. The Director's responsibilities include clinical and academic pediatric ENT program oversight, direction and mentorship of junior faculty, active patient care, and resident and medical student education. Extensive collaborative research opportunities are also available. Qualified applicants must be board certified in Pediatric Otolaryngology and licensed or eligible for licensure to practice medicine in Louisiana. A minimum of 7 years' experience in academic and/or clinical practice management is required. Compensation packages are competitive nationally.

Our pediatric faculty members share the benefit of subspecialist support from other department members in otology, laryngology, head and neck oncology, rhinology, skull base surgery, and plastic/reconstructive surgery.

The city of New Orleans is one of the most culturally diverse and fastest growing cities in the country, and residents enjoy outdoor activities and coastal access all year long. New Orleans offers many of the amenities of larger cities but continues to maintain a small town family oriented atmosphere.

Interested applicants should send a CV and cover letter to SOM-Jobs@lsuhsc.edu; reference Pediatric ENT Director.

LSUHSC – Department of Otolaryngology – Head and Neck Surgery **Assistant Professor or Associate Professor (non-tenure, full-time clinical track)**

The Department of Otolaryngology-Head and Neck Surgery of LSU Health Sciences Center is actively seeking applications for a full-time faculty position at the rank of Assistant or Associate Professor (non-tenure track). Qualified applicants must be BC in Otolaryngology, fellowship trained and BC/BE in Neurotology and licensed or eligible for licensure to practiced medicine in Louisiana.

This is an excellent opportunity to join an active neurotology practice with ample existing clinical volume for the new Neurotologist in cochlear implantation, otosclerosis, skull base/CPA lesions, chronic ear surgery, and vestibular management. The practice includes a fully equipped Hearing and Balance center, collaborative neurosurgeons, PhD vestibular Audiologist, and Vestibular/Facial therapist. Responsibilities include patient care, resident and medical student education, and clinical research. Extensive collaborative research opportunities are available.

Salary and rank will be commensurate with the knowledge, education and experience of the individual. Interested candidates should provide a cover letter and current Curriculum Vitae to: SOM-Jobs@lsuhsc.edu; reference Otolaryngology/Neurotology position. The School of Medicine does not participate in sponsoring faculty candidates for the Department of Health and Hospitals' Conrad 30 Program.

*LSUHSC-NO is an Equal Opportunity Employer for females, minorities, individuals with disabilities and protected veterans.
 LSUHSC is an AA/EEO employer.*



The Ear, Nose, Throat & Plastic Surgery Associates

- Head and Neck Surgeon
- Pediatric Otolaryngologist
- General Otolaryngologist

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

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

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

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

Interested candidates should send CV to or may contact:

Debbie Byron, Practice Administrator

Phone: 407-342-2033

E-Mail: dbyron@entorlando.com

Cape Cod Opportunity

4-physician practice seeking general otolaryngology partner. Full service practice covering the Cape and Islands.

Audio, VNG, CO2 laser, allergy, in-office Sinuplasty, and video/strobe laryngoscopy. 1 in 6 call schedule. 1 hour from Boston, great area for outdoor activities.

Send CV to:

Edward Caldwell, MD

65 Cedar St.

Hyannis, MA 02601



CAPE COD EAR, NOSE AND THROAT SPECIALISTS
HEAD & NECK SURGERY, P.C.
FACIAL PLASTIC SURGERY

Otolaryngologist Opportunity

Geisinger Wyoming Valley (GWV) Medical Center, Wilkes-Barre, Pa., is seeking a BC/BE Otolaryngologist.

Geisinger's otolaryngology specialists treat a wide range of conditions of the head and neck by providing the latest technologies in diagnostic, medical, surgical and rehabilitative techniques. We have board-certified and fellowship-trained specialists who collaborate to ensure the most comprehensive care.

About the Position

- Take part in the growth of this dynamic department
- Benefit from support from advanced practitioners as well as two on-staff audiologists
- Pursue research in your area of interest

Medical school loan repayment and residency and fellowship stipends are available.

Geisinger Wyoming Valley (GWV) Medical Center, Wilkes-Barre, Pa., is an acute care hospital that is licensed for 243 beds and houses the only Level II Trauma center in Luzerne County. The campus includes the Frank M. and Dorothea Henry Cancer Center, The Richard and Marion Pearsall Heart Hospital, the Janet Weis Children's Hospital Pediatric Unit, a transplant program and the Brain & Spine Tumor Institute. GWV is affiliated with an accredited otolaryngology residency program.

Discover for yourself why Geisinger has been nationally recognized as a visionary model of integrated healthcare.

For more information, please visit geisinger.org/careers or contact: **Autum Ellis, Department of Professional Staffing**, at 1-800-845-7112 or amellis1@geisinger.edu.

Follow us: Geisinger is a drug-screening employer; EOE/M/F/D/V

GEISINGER
HEALTH SYSTEM



Southern Illinois University Division of Otolaryngology Head and Neck Surgery is seeking fellowship-trained surgeons to join our growing academic faculty practice at the Assistant or Associate Professor level. The Division currently has eight academic faculty members and four community faculty affiliated with our residency program, training two residents each year. Teaching of surgical residents and medical students in an institution committed to educational excellence is emphasized. A state-of-the-art surgical skills training center will open in 2015 providing teaching opportunities including image-guided and robotic surgery. Clinical and basic science research opportunities are available at the Carol Jo Vecchie Women's and Children's Hospital, the SIU-Simmons Cancer Institute and within our Division that has had continuous NIH-funded research for over 25 years. Highly competitive salary will be offered that will be commensurate with the level of experience.

Head and Neck Surgery: Candidates for this position will join a busy practice in head and neck oncology, endocrine surgery, microvascular and Mohs reconstruction and robotic surgery. The Simmons Cancer Institute at SIU is a regional referral center that provides multidisciplinary oncology care and houses a core research facility with state of the art imaging, tumor repository, and flow cytometry.

Facial plastic and Cosmetic Surgery: Candidates for this position must have expertise in facial cosmetic surgery and aesthetic techniques, reconstructive surgery including microvascular techniques and Moh's reconstruction, and maxillofacial trauma. Opportunity to work on the multidisciplinary team treating congenital head and neck anomalies including cleft lip and palate, is available.

Pediatric Otolaryngology Surgery: Candidates for this position will have the opportunity to work in all areas of the specialty. Dedicated Pediatric Anesthesiology and NICU support staff work in state of the art facilities opening in June 2014. Expertise in pediatric and neonatal airway management is required. Opportunity to participate in the Pediatric Cochlear implant program is available for the interested individual.

Southern Illinois University School of Medicine is located in Springfield Illinois, a historic Midwestern city of 120,000 that serves a catchment area of over 2 million people in central and southern Illinois. The city of Springfield is an excellent place to live and raise a family offering a variety of both public and private schools. Springfield and the surrounding communities are rich in Lincoln history, and as a state capitol, offer a multitude of cultural activities and fine dining experiences. Conveniently located between St. Louis and Chicago, Springfield offers all of the amenities of larger cities while maintaining its small town feel.

Interested applicants should contact Carol A. Bauer, M.D., Division Chair of Otolaryngology, at cbauer@siumed.edu or send a letter of interest with a current curriculum vitae to:

Carol Bauer, M.D.
SIU School of Medicine
Division of Otolaryngology-Head & Neck Surgery
P.O. Box 19662
Springfield, IL 62794-9662



JOIN THE PROMEDICA FAMILY

Otolaryngologist Opportunity in Toledo, Ohio

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

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

- Full employment with ProMedica Physicians
- “Built in” referral base and high volume
- Call shared equally among all members (currently 1:6)

- Trauma call is optional and paid separately
- Opportunity for teaching residents and medical students
- All members participate in weekly board meetings
- Competitive compensation and generous benefits package
- Relocation paid up to \$10K
- Perfect balance of work and lifestyle

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

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

ProMedica is a tobacco-free employer. EOE

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Live. Work. Play.

Job Opportunity in South Florida Medical Director, Division of Otolaryngology

About the Opportunity:

Memorial Healthcare System is seeking a Medical Director of the Division of Otolaryngology. This is a full-time hospital employed leadership position with competitive benefits and compensation package. Memorial Healthcare System currently employs two otolaryngologists supporting an established ENT outpatient practice, inpatient hospital consults, and ER call.



Successful candidates will meet the following criteria:

- Fellowship training in head and neck surgery required;
- Board certified in otolaryngology;
- Minimum of five (5) years leadership experience required;
- Understands and practices evidence-based medicine;
- Excellent communication, interpersonal and team leadership skills;
- Establish policies and guidelines to monitor effectiveness of medical care, evidence-based clinical outcomes and patient progress;
- New program development experience.

About Memorial Healthcare System:

Memorial Healthcare System is a 1,900-bed healthcare system located in South Florida and is highly regarded for its exceptional patient- and family-centered care. Memorial's patient, physician and employee satisfaction rates are some of the most admired in the country, and the system is recognized as a national leader in quality healthcare.

About South Florida:

South Florida offers quality of life, is rich in cultural and recreational amenities, and offers pristine beaches, top-rated golf courses, museums and world-class dining. The greater Ft. Lauderdale area offers numerous communities in which to raise a family. In addition, Florida has no state income tax.

To inquire about this opportunity or learn more, visit memorialphysician.com.

THE UNIVERSITY OF NEW MEXICO
Department of Surgery, Division of Pediatric Otolaryngology

The Department of Surgery, Division of Otolaryngology, at the University of New Mexico is seeking a Pediatric Otolaryngologist who is trained in all aspects of pediatric otolaryngology surgery. This position will be recruited at the Assistant/ Associate Professor level. Research opportunities are available if desired, and clinical research opportunities are readily available. Appointment and salary will be commensurate with level of experience.

The successful candidate will participate in an active Pediatric Otolaryngology practice, as well as provide resident teaching rounds, medical student teaching and participation at local and national conferences. It is an excellent opportunity for a pediatric otolaryngologist interested in academic achievements and good clinical experience. An excellent compensation package is provided.

Minimum Qualifications: Medical doctor who is board certified/eligible in Otolaryngology-Head and Neck Surgery, eligible for licensure in New Mexico, and eligible to work in the U.S.

Preferred Qualifications: Academic/clinical experience and completed fellowship in Pediatric Otolaryngology, or completing a fellowship in the next twelve months.

Interested applicants must apply for this position via UNMJobs website, unjobs.unm.edu/, Posting# 0824589. Please attach electronic copies of a current CV and a letter of interest to the application.

In addition, please submit three (3) letters of reference to the email address below. Applications will not be considered complete until all three (3) letters of reference are received. This position **will remain open until filled**; however, for best consideration, application materials should be received by **June 01, 2014**. For more information and to submit letters of reference, please contact Erica Bennett, M.D., at EBennett@salud.unm.edu.

The UNM School of Medicine is an Equal Opportunity/Affirmative Action Employer and Educator. This position may be subject to criminal records screening in accordance with New Mexico state law. J1 Visas are not eligible for this opportunity. UNM's confidentiality policy ("Disclosure of Information about Candidates for Employment," UNM Board of Regents' Policy Manual 6.7), which includes information about public disclosure of documents submitted by applicants, is located at <http://www.unm.edu/~brpmlr67.htm>

KU UNIVERSITY of KANSAS
DEPARTMENT OF
OTOLARYNGOLOGY-
HEAD & NECK SURGERY

Head and Neck Fellowship

Clinical Focus: Head and neck surgical oncology skull base surgery, endoscopic laser surgery, minimally invasive endocrine surgery, microvascular reconstructive surgery and robotic surgery

Applications are accepted through the American Head and Neck Society: www.ahns.info

To view position online, go to <http://jobs.kumc.edu> and search by position number.

Letters of inquiry and CV may be mailed or emailed to:

Dan Bruegger, MD, Associate Professor and Interim Chairman
 The University of Kansas School of Medicine
 Department of Otolaryngology-Head & Neck Surgery
 3901 Rainbow Blvd, MS 3010, Kansas City, KS 66160
 Email: dbruegge@kumc.edu

Otolaryngologist Opportunity

Geisinger Health System (GHS) is seeking a BC/BE Otolaryngologist for Geisinger-Scenery Park, located in State College, Pa.

Bring your expertise to a growing practice with an established referral base. Enjoy a balanced schedule and the opportunity to participate in program development.

Geisinger Health System serves nearly 3 million people in Northeastern and Central Pennsylvania and has been nationally recognized for innovative practices and quality care. A mature electronic health record connects a comprehensive network of 5 hospitals, 43 community practice sites and more than 1000 Geisinger primary and specialty care physicians.

The State College region offers an outstanding quality of life in a university town environment, including excellent restaurants and cultural activities, and some of the top nationally-ranked public and private schools. State College offers easy access to Interstate-80 and a local airport for weekend getaways to Philadelphia, Washington D.C. and New York City.

Discover for yourself why Geisinger has been nationally recognized as a visionary model of integrated healthcare.

For more information, please visit geisinger.org/careers or contact: **Autum Ellis, Department of Professional Staffing**, at 1-800-845-7112 or amellis1@geisinger.edu.

Follow us:  

GEISINGER
 HEALTH SYSTEM

EVERY SKILL
EVERY EFFORT
**EVERYTHING
I HAVE**

BC/BE Otolaryngologist

When the work you do every day has a crucial impact on the lives of others, every detail matters. That's why our world-class professionals devote every ounce of their hearts and clinical expertise to all that they do here at Cedars-Sinai.

Cedars-Sinai Medical Group is a premier multi-specialty medical group located in Beverly Hills, CA. We are physician directed and committed to providing personalized, comprehensive healthcare with an emphasis on quality. We are seeking a full-time BC/BE Otolaryngologist to join our busy four Physician and two Physician Assistant ENT practice. The candidate must be willing to cover General and Pediatric Otolaryngology but clinical interest in Otology/Neuro-otology and Laryngology a bonus. Excellent interpersonal skills and the motivation to build and maintain a busy practice are essential.

We offer a competitive salary and benefits package. Please submit CV and cover letter to: Gene.Liu@cshs.org

For more information about Cedars-Sinai Medical Group, please visit our website at cedars-sinai.com

There will be opportunities to interview at the AAO-HNSF Annual Meeting & OTO EXPOSM in Orlando.



Cedars-Sinai is an Equal Opportunity Employer that welcomes and encourages diversity in the workplace.



HOUSTON

The Department of Otorhinolaryngology-Head & Neck Surgery is recruiting faculty members with interests in facial plastic & reconstructive surgery, head & neck surgery and pediatric ENT.

This is a unique opportunity to join a growing, established academic practice at a large medical center in an urban setting. Fellowship training preferred, but not required. Academic appointment commensurate with experience. Great salary and benefits. Excellent opportunities for teaching and research.

Applicants should forward a CV and statement of interest to:
Martin J. Citardi, MD (chair)
The University of Texas Medical School at Houston
Department of Otorhinolaryngology-Head & Neck Surgery
866-205-6487 (fax)
martin.j.citardi@uth.tmc.edu
www.ent4.me/recruit

UTHealth
The University of Texas
Health Science Center at Houston
Medical School

UTHealth is an EEO/AA employer. UTHealth does not discriminate on the basis of race, color, religion, gender, sexual orientation, national origin, genetics, disability, age, or any other basis prohibited by law. EOE/AF/Disabled/Vet

 **Washington University in St. Louis**
SCHOOL OF MEDICINE

FULL TIME ACADEMIC FACULTY POSITIONS AVAILABLE

PEDIATRIC OTOLARYNGOLOGIST

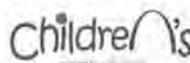
The Department of Otolaryngology-Head and Neck Surgery is seeking a fellowship-trained pediatric otolaryngologist. Applicants must be board certified or board eligible in Otolaryngology. The Division of Pediatric Otolaryngology provides services at St. Louis Children's Hospital and appointment is provided commensurate with experience at Washington University School of Medicine. Responsibilities include inpatient and outpatient consultations, surgery at the Children's Hospital and at our West County outpatient surgical center, teaching of residents and fellows and call coverage for St. Louis Children's Hospital one out of six nights. U.S. News and World Report named St. Louis Children's Hospital the 6th best Children's Hospital in the country in 2013. Interested applicants should send inquiries and CV to:

Keiko Hirose, MD
Chief of Pediatric Otolaryngology
Washington University School of Medicine
660 South Euclid Avenue, Box 8115
St. Louis, MO 63110
Phone: 314-454-4033, Fax: 314-454-2164
hurosek@ent.wustl.edu

HEAD AND NECK ONCOLOGIC AND RECONSTRUCTIVE SURGERY

The Department of Otolaryngology-Head and Neck Surgery at Washington University School of Medicine invites applications for a full-time faculty position at the Assistant or Associate Professor level in the Division of Head & Neck Surgical Oncology. Fellowship training or extensive experience in ablative surgery, reconstructive microsurgery and multidisciplinary management of head & neck cancer patients is required. For candidates with a research background, there are opportunities to develop an independent or mentored research program if desired. This position will include patient care responsibilities at Barnes-Jewish Hospital & the Siteman Cancer Center, a NCI Comprehensive Cancer Center & member of the National Comprehensive Cancer Network (NCCN). Candidates must be able to obtain a Missouri State license and must be board certified or eligible for certification. Interested applicants should send inquiries, CV and 3 letters of recommendation to:

Bruce H. Haughey, MBChB (haugheyb@ent.wustl.edu) and Brian Nussenbaum, MD (nussenbaum@ent.wustl.edu)
Division of Head and Neck Surgical Oncology
Department of Otolaryngology-Head and Neck Surgery
Washington University School of Medicine
660 South Euclid Ave, Campus Box 8115
St. Louis, MO. 63110
Phone 314-362-7395



Are you more interested in building a legacy than just finding a job?

The Department of Otolaryngology at West Virginia University is seeking a pediatric otolaryngologist to join a thriving academic practice. 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.

You'll join a highly skilled team making an extraordinary difference in the lives of patients across our entire state. Ours is a collaborative atmosphere that encourages you to grow and evolve as you practice advanced medicine in a highly satisfying academic setting.

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

U.S. News & World Report ranked West Virginia University Hospitals in Morgantown #1 in the state for the last two years. Forbes recently ranked Morgantown as one of the Best Small Metros in America. Our area offers the cultural diversity and amenities of a large city in a safe, family-friendly environment. There is also an excellent school system and an abundance of beautiful homes and recreational activities.

Build your legacy as you serve, teach, learn and make a difference from day one. To learn more, visit <http://medicine.hsc.wvu.edu/otolaryngology/Home> or submit your CV directly to Laura Blake, Director of Physician Recruitment, at blakel@wvuhealthcare.com.



WVU is an AA/EO employer and is the recipient of an NSF ADVANCE award for gender equity. Position will remain open until filled.



HOUSE CLINIC

The Associates of the House Clinic invite interested physicians to apply for the following positions:

Los Angeles, California Office: Neurotologists

Two positions are available for neurotologists to practice otology, neurotology, and skull base surgery.

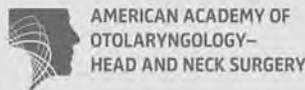
Basic qualifications:

- MD degree from an accredited program
- Completed accredited residency program in Otolaryngology-Head and Neck Surgery
- Completed fellowship in Otology/Neurotology
- Board certified or eligible (with Neurotology subspecialty) by the American Board of Otolaryngology

Interested parties should send a CV, cover letter, and two reference letters to:

M. Jennifer Derebery, MD
President, House Clinic
2100 W. Third St. #111
Los Angeles, CA 90057
Email: jderebery@hei.org

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Featured 9th in Money Magazine's "Best Places to Live", Ames, Iowa is recognized as an active, friendly community with plenty to do. Ames is a vibrant university town with one of the highest-rated public school systems in the nation. Having close access to several major metropolitan cities means that this versatile community provides small-town serenity and charm plus big-city amenities and culture.

EEO/AA Employer/Protected Vet/Disabled

Contact Doug Kenner
866.670.0334 or dkenner@mountainmed.net

Children's Hospital LOS ANGELES
 DIVISION OF OTOLARYNGOLOGY HEAD AND NECK SURGERY

Division of Otolaryngology Head and Neck Surgery
 Children's Hospital Los Angeles

Department of Otolaryngology
 Keck School of Medicine
 University of Southern California

Full-Time Pediatric Otolaryngologist at the Assistant/Associate Professor level with the University of Southern California at Children's Hospital Los Angeles.

The candidate must be fellowship trained and either board eligible or certified. Specialty interest and/or training in airway, laryngology, or otology would be preferred. The candidate must obtain a California medical license.

CHLA is one of the largest tertiary care centers for children in Southern California. Our new 'state-of-the-art' 317 bed hospital building with 85% private rooms opened July 2011. Our group has a nice mix of academic and private practice. Both clinical and basic science research opportunities are available and supported.

Excellent benefits available through USC
 USC and CHLA are equal opportunity and affirmative action employers. Women and men, and members of all racial and ethnic groups are encouraged to apply.
 Academic appointment through USC Keck School of Medicine is available at a level appropriate to training and experience.

Please forward a current CV and three letters of recommendation to:
 Jeffrey Koempel MD, MBA
 Chief, Division of Otolaryngology – Head and Neck Surgery
 Children's Hospital Los Angeles
 4650 Sunset Boulevard MS# 58
 Los Angeles, CA 90027
jkoempel@chla.usc.edu
 (323) 361-5959

Full Time Faculty Opportunities
University of Rochester Medical Center

Clinician-Scientist / Neurologist
 BC/BE, fellowship trained boarded neurologist with appropriate research training at any rank is sought to develop an outstanding clinical practice and externally funded research program and join three other practicing neurologists. Applicants must also contribute to resident and medical student education. Basic, translational, or patient-oriented research programs are desired. Protected research time and resources are available.

Pediatric Otolaryngologist
 BC/BE, fellowship trained pediatric otolaryngologist at any rank is sought to practice at the brand new Golisano Children's Hospital, opening in 2015. This position offers excellent opportunities to practice the full range of the specialty in state of the art facilities. Resident teaching is expected and scholarly activities strongly encouraged. Protected research time and resources are available for candidates seeking a career as a clinician-scientist.

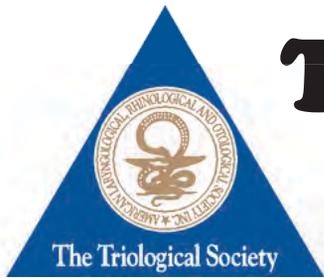
General Otolaryngology
 BC/BE otolaryngologists with broad clinical interests are sought to develop a general otolaryngology practice in a community setting with full academic support.

Our robust clinical practice and training program is affiliated with the University of Rochester Medical Center's Strong Memorial and Highland Hospitals. These are excellent opportunities to practice with an established group of academic faculty who already have practices in all Otolaryngology subspecialty areas, in a growing academic department.

The University of Rochester is an affirmative action/equal opportunity employer and strongly encourages applications from women and minorities.

Interested candidates should send their curriculum vitae and letter of interest to:

Shawn Newlands, M.D., Ph.D., M.B.A., F.A.C.S.
 Professor and Chair
 Department of Otolaryngology
 Strong Memorial Hospital
 601 Elmwood Avenue, Box 629
 Rochester, NY 14642
 (585) 758-5700
shawn_newlands@urmc.rochester.edu



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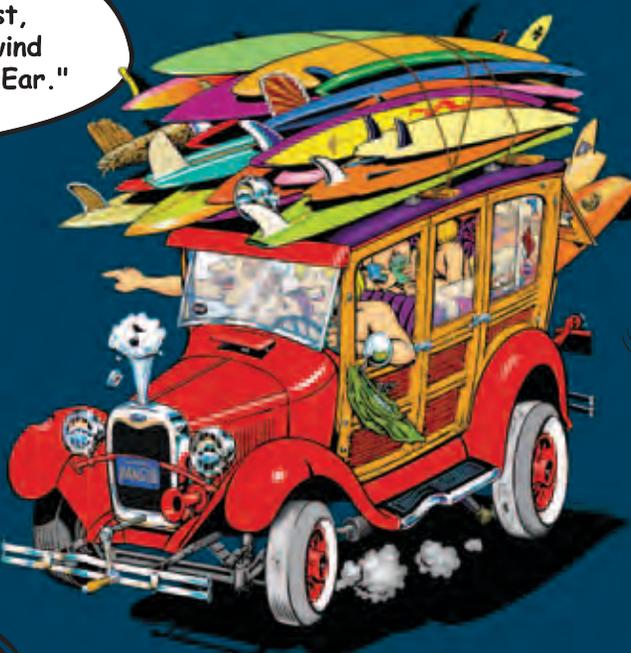


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