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American Academy of Otolaryngology—Head and Neck Surgery November 2014—Vol.33 No.11

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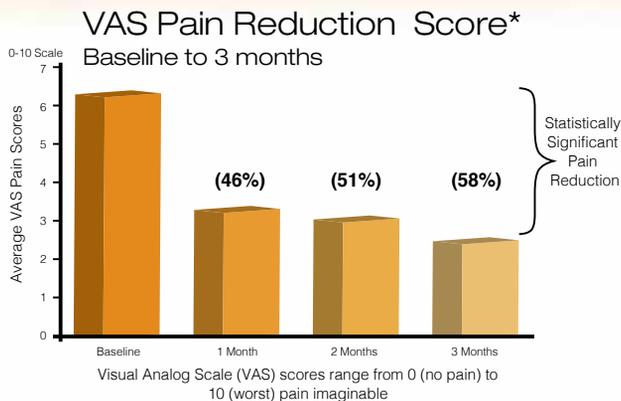
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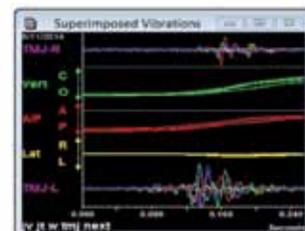
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*Tavera A, et al: Approaching Temporomandibular Disorders From a New Direction. A Randomized Controlled Clinical Trial of the TMDes Ear System. J Craniomandibular Practice July 2012; Vol 30, No 3, 172-181.

**This was a single-patient study using JVA to measure the before and after effects with TMJ NextGeneration™ devices; individual results may vary.



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Excellence Continues with Change in Leadership

Transitions frequently evoke anxiety because people believe that change requires a period of instability. Such is not the case for the American Academy of Otolaryngology—Head and Neck Surgery. Throughout his 13-year tenure, **David R. Nielsen, MD**, has been mindful of the fact that he would not be at the helm forever. He has developed structure and cultivated staff to build a strong organization that will endure after his retirement. Dr. Nielsen has emphasized quality, evidence-based guidelines, and performance measurement during his tenure at AAO-HNS. As a result of his efforts, our Academy plays a leadership role in quality and research. His legacy in these areas will be of great value as we work through the tremendous changes in our practices.

To honor Dr. Nielsen, the Academy has established the David R. Nielsen, MD Endowment. A gift to this fund not only honors Dr. Nielsen, but it will sustain AAO-HNS/F efforts to ensure that we can continue to provide the best possible care for our patients. Dr. Nielsen will continue to support the Academy through his other activities in organized medicine,

particularly in his role as president and chair of the Board of Directors of the Council of Medical Specialty Societies (CMSS).

Our Academy is twice blessed in this transition, because our new CEO, **James C. Denny III, MD**, brings years of valuable experience in working hard for us. He was an excellent president and has distinguished himself as a highly effective coordinator for Socioeconomic Affairs. He is fluent in the day-to-day functioning of our Academy and knows health policy inside and out. He has worked well with representatives of key agencies. He serves on the Executive Committee of the American College of Surgeons as Advocacy and Health Policy Pillar Lead. Dr. Denny has always demonstrated a passion for improving the care of our patients, and as Dr. Nielsen departs we could not be left in better hands.

The system for leadership succession in the AAO-HNS is truly remarkable. Unlike most large medical organizations, we have real elections with membership engagement. The composition of the Board of Directors and the procedures



Gayle E. Woodson, MD
AAO-HNS/F President

for nomination of candidates for office are designed to maximize grassroots involvement in governance. The Board of Governors and Academy Committee structure offer rich opportunities for meaningful participation in the mission. This provides fertile conditions for preparing and identifying future leaders of the organization. This issue of the *Bulletin* contains the new committee roster. Members interested in getting involved should peruse this list and submit applications to join a committee.

Now What?

I am often stopped by members and asked, “What are you working on?” As we address programs, projects, work plans, and ongoing services we perform every day, it’s good to take a moment, step back and look at the “big picture” view of how we are addressing not only what keeps us up at night today, but what appears to be the biggest challenges of tomorrow.

Here are some of the high level concerns that require our attention if we are to thrive in the future:

1. The traditional business model for association services is evolving.

Clay Shirkey, in his book, *Here Comes Everybody*, describes the differences between how humans have “associated” for centuries around a common link, and then shared ideas and action for a common purpose. He shows how today we share almost everything indiscriminately with everyone, and then decide what we have in common. This “reverse association” process alters how associations engage, serve, and support physicians. What do we have of value that not only serves our physician members, but that they can use to



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



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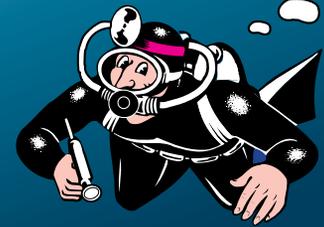


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"Less high-frequency wind & engine, can hear girlfriend's voice."



serve their patients, allied health colleagues, and other physicians, too?

2. “Transparency” is an expectation of ever increasing importance. Data of questionable accuracy, validity, relevance, and usefulness are being publicly reported in the name of accountability. How can we meet the needs for *reasonable* accountability and prevent negative consequences from such actions as the CMS physician payment data

release, the Open Payments (Sunshine) Act, and published interpretations of misleading or inaccurate information?

3. There is a proliferation of competing reporting requirements linked to physicians’ services. How can we create solutions (rather than just react to ill-conceived demands) that collectively meet the needs of patients, employers, health plans and systems, and government, each with their own quality and performance expectations?

So, in addition to our year-round work on educational programming, regulatory health policy advocacy, legislative oversight and advocacy, communications, Annual Meeting and OTO EXPOSM, evidence-based guidelines, and other quality products, we are applying strategic governance, structure, and operational efforts to ensure you have all the support you need to provide the best otolaryngology care possible. 

A Few of My Favorite Things



This is an interesting time of year. The excitement of the Annual Meeting is behind us, and we are getting ready for the upcoming holidays followed by a long

winter. It is a good time to take a breath and appreciate how fortunate we are to be in the greatest profession, led by our top-notch Academy. There are so many reasons to be a part of the Academy, including unity, collegiality, and the advancement of our specialty. What follows are just a few of my favorite things about the Academy.

Networking

Networking is one of the most rewarding aspects of being a professional. It is refreshing to get out of one’s own practice environment and interact with other otolaryngologists from across the country and around the world. The Academy offers many ways to do this. Attending the Annual Meeting is, of course, one way; after all, it is the largest gathering of otolaryngologists in the world. The spring leadership meeting is another excellent opportunity. It is generally a less busy meeting, with greater opportunity to meet and greet. Another option, committee participation, allows interaction with a small,

like-minded group of people throughout the year via projects, conference calls, etc. The Board of Governors is another great way to connect, especially related to grassroots issues affecting our specialty. Also, we are now fortunate to have our own ENT-only social media network, ENT Connect.

Publications

There are too many excellent educational products from the Academy to list them all here, but some of my favorites are the journal for cutting-edge research, the guidelines for keeping pace with the latest recommendations based on the literature, and the very *Bulletin* you are reading right now for a great mix of practice and advocacy related issues as well as Academy “goings-on.” Countless staff and otolaryngologist hours go into the production of every Academy product, and that is reflected in the quality of these and all Academy offerings. Of course, all of these products take months to produce, so for up-to-the-minute information, the weekly email “The News” fills the gap.

Strong Leadership

These are trying times in medicine. We are so fortunate to have excellent leaders in our Academy to guide us through these difficult times. The Advocacy branch of



**Susan R. Cordes, MD, Chair,
BOG Legislative Affairs Committee**

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

the Academy makes sure we are at the table regarding any important policy issues that could affect our practices. And for every section, committee, board, etc., there is a hard-working Academy staff member making sure deadlines are met, goals are realized, and members are satisfied. We are so fortunate to have the best staff in the business.

No doubt, each of us has our own favorite aspects of the Academy. So, before you dive into that turkey or travel to see your relatives, let’s take a few minutes to be thankful for our otolaryngology colleagues, our excellent Academy, and the privilege to provide our patients with the best ear, nose, and throat care. 

The Making of a Physician, a Surgeon, and an EVP/CEO: David R. Nielsen, MD



By *M. Steele Brown*

David R. Nielsen, MD, never planned any of this. He did, however, work hard to get here.

The Executive Vice President and CEO of the American Academy of Otolaryngology—Head and Neck Surgery and its Foundation, Dr. Nielsen—one of 11 children—several of them trial attorneys, did not grow up dreaming of becoming a physician.

“When I started college, I had no idea what I wanted to do for a living,” he said. “I did know I did not want to be a lawyer. Frankly, most of the things I’ve accomplished in my life I didn’t intentionally set out to do from the beginning, and choosing medicine is probably a good example.”

A Lofty Goal

The medical school option began to crystallize strangely enough after a self-described “lousy” first year at the University of Utah, where he “spent too much time skiing and not enough time attending class or doing homework.” On

scholarship from an insurance company executive who valued education, Dr. Nielsen decided it was time to grow up and get to work, even if he had no clear idea what that work should look like.

“So I set a goal so lofty that I’d still be better off than I was in the first place if I didn’t make it,” he said. “I thought, ‘OK, medical school’s a lofty goal, but I don’t really know what it means to be a doctor, but that’s OK. I’ll see whether or not this is for me.’ I decided a business degree would be good to have as a back-up.”

Unfortunately, Dr. Nielsen’s advisor believed that lackluster first year was going to be tough to overcome and told him to abandon medicine. Dr. Nielsen was determined to try.

“His response was, ‘OK, if you want to do this...you will go to every one of your professors at the beginning of the semester and ask them to write you an evaluation and a personal letter of recommendation at the completion of the class.’”

So Dr. Nielsen had the conversation with every professor, every semester. “I know I annoyed the heck out of them, but every one of them wrote me one,” he said.

When he finally applied to the University of Utah School of Medicine, Dr. Nielsen had a 4.0 GPA, as well as a phone book-thick folder of those letters.

Even after the hard work and good grades, Dr. Nielsen still didn’t believe he would get accepted. Yet he did and that, as he puts it, “created a conundrum for me because I knew nothing about medicine.”



Making an ENT

At the same time he'd been studying, Dr. Nielsen also had been working for a family neighbor—an orthopedic surgeon—as an office assistant.

“I worked mornings for him and took a bus up to campus in the afternoon or evening every day for a couple years,” Dr. Nielsen said. “By the time I was done, I was doing all of his cast work and taking care of all of his traumas. So, when I first went to medical school, I was going to be an orthopedic surgeon.”

That notion changed in his third year.

“I had a couple of weeks of elective to fill and I just picked ENT out of the hat.”

Working with a microscope, Dr. Nielsen discovered he had real skills with his hands.

“It’s like building ships in a bottle,” he said. “The head and neck is just so full of anatomy, and it’s really tiny, delicate work—even breathing or sweating is enough to throw you off. Not everybody can do it and I just fell in love with it.”

Dr. Nielsen discovered his love of otology during his residency at Utah, which featured one of the world’s first laser labs.

“**John Dixon, MD**, was doing some pioneer work with lasers treating esophageal varices and stomach problems in general surgery, and there weren’t many laser applications being used in the head and neck back then, but our department was starting to use them for lesions of the tongue and the nose and to excise some cancers,” he said. “Then I discovered there were a couple of pioneers using the laser to do these microscopic ear procedures that hadn’t really been accepted yet.”

One of those pioneers, **Ted McGee, MD**, had developed a technique for using



a laser to perform a stapedectomy at his practice in Detroit.

“He had a fellowship program, and I went to work with him doing laser stapes work,” he said. “In fact, Providence Hospital had just started to do laser surgery, and I actually wrote the laser safety manual for the hospital.”

Arizona Highways

In 1984, Dr. Nielsen set up a solo otology practice in Phoenix. About 13 years later, he became a senior consultant at the newly built Mayo Clinic campus in Scottsdale where he stayed until he joined the Academy in 2002.

Early on in his solo career, Dr. Nielsen got a call from former AAO-HNS President **Neil O. Ward, MD, MALS**, then president of the Arizona Medical Association. Dr. Ward was looking to start a young physician section.

“He invited 30 or 40 young doctors and six of us showed up,” Dr. Nielsen said. “The new section had six officer positions, so every one of us got one.”

As a result, Dr. Nielsen attended American Medical Association (AMA) meetings as a delegate and got to know people.

“I’d listen to Dr. Ward talk about health policy and legislation and government

affairs and think, ‘Oh man, how does he know so much?’” Dr. Nielsen said. “He told me that the only school for learning is to get involved and participate.”

Dr. Nielsen did and eventually was elected chair of the AAO-HNS Board of Governors, which gave him a seat on the Academy’s Board of Directors.

The Road to Alexandria

When former EVP **Michael D. Maves, MD, MBA**, left the AAO-HNS in 1999 to join the Consumer Healthcare Products Association, several people encouraged Dr. Nielsen to apply.

“It seemed like everyone who had served in that position in the last 100 years had either been a dean or a department chair or program director,” Dr. Nielsen said. “We’d never had anybody from the West; and solo private practitioners don’t preside over anyone beside their nurse and their assistant. I didn’t take it seriously until I got a call from someone at the (Academy) saying I should apply.”

Dr. Nielsen applied, confident that he would not be chosen, but certain it would be good to “stretch my wings a little bit and see,” he said.

The person who did get it, **G. Richard Holt, MD**, whom Dr. Nielsen describes as “an absolutely spectacular man,” like Dr. Maves, chose another career path.

“The (then) president of the Academy, **KJ Lee, MD**, who was chairing the search committee, called and said I should apply,” Dr. Nielsen said. “My youngest son was just graduating high school and we figured that if we were going to do something like this, now was the time.”

This time the offer came and he accepted.

“ I always think David thinks about five years ahead of everybody else. I think that is where David is and he works very hard to get people to get there.

—John S. Rhee, MD, MPH

He did a lot of things to change the culture of the Academy, the culture of the Board and he has really helped us to adapt to all of the changes in medicine.

—Richard W. Waguespack, MD



In 1994 during the Arizona years, Dr. Nielsen served as national campaign chair for the AAO-HNS campaign against secondhand smoke. Its kick-off event speakers included: (left to right) then U.S. Surgeon General Jocelyn Elders, MD; Joan Lunden, campaign spokesperson and host of "Good Morning America"; Academy EVP Jerome C. Goldstein, MD; David Nielsen, MD; and Nancy Snyderman, MD, "Good Morning America" correspondent.

Visionary Changes

In Dr. Nielsen's view, both the Academy and the specialty of otolaryngology—head and neck surgery have changed more in the last 12 years than they did in the previous century.

As one of the smallest (in terms of membership) of the 24 primary specialty societies, Dr. Nielsen said he is proud of the range of services the AAO-HNS provides.

"We do it all—practice management, IT, health policy, state and federal regulatory and legislative affairs, research, education, and the best meeting in the world—and the cost of that is roughly the same as it is for other societies, but we have to spread that out over just 10,000 doctors," he said. "We have learned to become more effective or efficient as a staff and we require and benefit from a much higher level of volunteerism from our members than many other societies. That's been quite successful."

Compared to 12 years ago, Dr. Nielsen said the Academy has doubled the amount of work it is doing, even though it has reduced staff levels from 87 to 64 people since 2002.

"We now have a department that combines research, quality and health policy, as well as an IT (now called Information and Knowledge Management) unit that was paired down by half, but is now much more effective and efficient offering support around various processes, including the new

website and community portal," he said. "Overall, we're doing a lot of things that we couldn't do 12 years ago and we are doing them with more efficiency."

He also takes pride in the Academy's increased visibility and voice.

"We've gone from being kind of invisible in certain conversations to being sought out," he said. "Government agencies and other organizations want to hear our ideas about healthcare, delivery, and payment reform. The respect we

“ I was on the committee that actually selected David to be the EVP. We knew he was a doctor. He seemed like a nice guy, but...we had no idea what a force of nature he was going to be.

—Gayle E. Woodson, MD

David has cemented the face of the organization, to ourselves and to the public, the way we would like it to be. He is a thoughtful, caring, intelligent, knowledgeable, physician. And, ENTs are just the best type of doctor and he represents that.

—Sujana S. Chandrasekhar, MD

are given, owing to the Academy's involvement in issues and our evidence-based opinion, has gone up dramatically."

Quality Is Job No. 1

Nowhere can this increased visibility be seen more than in the area of quality and evidence-based guidelines, according to Dr. Nielsen. In the past decade, the AAO-HNS has become extremely skillful in addressing quality medicine in a formal way. The Academy has always had good doctors who care more about quality than about anything else, he said, but it never had a systematic, organized method of approaching or documenting the quality the specialty and its physicians offered.

When Dr. Nielsen took over in 2002, he mobilized the leaders of all the subspecialty societies in otolaryngology to develop evidence-based guidelines for the specialty that could take up the challenge issued by the National Guidelines Clearinghouse (NGC).

"To have your guidelines published, they have to be of a certain rigor, meet a certain set of criteria; you can't just make up a guideline and have the NGC publish it," Dr. Nielsen said. "When we started this push, there were dozens and dozens of guidelines related to otolaryngology, and not a single one of them had been accepted by the NGC and none of them had been produced by the Academy."

The AAO-HNSF has now produced more than a dozen NGC-published guidelines and has been cited by both the Institute of Medicine (IOM) and the Council of Medical Specialty Societies (CMSS) as an example of how best to produce effective and appropriate evidence-based standards.

The Academy has also diverted its resources to support more broadly based research, instead of focusing exclusively on the basic sciences and clinical translational research.

"We still maintain our support for those types of research, but we've expanded to health services research—focusing on how we get from the bedside into systems and populations so we can eliminate unwanted variations in healthcare and outcomes for the sake of improving public health."

Dr. Nielsen said that with all of the

“ I think that he embodies a statement that he often makes, which is a quote by Abraham Lincoln: It is amazing what people can accomplish when you do not care who receives the credit.

—Liana Puscas, MD

The notion of quality and evidence-based medicine, it was just taking off. And through his vision and leadership, we are on the cutting edge of all the specialties as far as producing quality type materials.

—James C. Denney III, MD

changes taking place with regard to how healthcare is delivered, the Academy wants to make sure quality doesn't suffer.

“There's a real temptation for physicians and physician organizations to start checking boxes,” he said. “If we're going to (offer care), we're going to do it because it really makes patients better. We also want to aggregate the demand, because if we've set our standards so high that we exceeded everybody else's, we are in pretty good shape.”

The Transition

When Dr. Nielsen turns his office over to the new EVP/CEO, **James C. Denney III, MD**, on January 15, 2015, it will cap off a transition plan that has been in the works for more than year.

“I sat down with the executive leadership team a year ago to get processes in place and I told them my retirement could not be a distraction because we had too much work to do.” Dr. Nielsen said he started by having open conversations with senior leaders on staff to minimize any disruptions.

“I want my staff to feel secure and know they're supported, because whatever we've changed, whatever we've accomplished, it isn't me that's accomplishing it,” Dr. Nielsen said. “It's this incredible staff around me, and the thousands of doctors who make life-and-death decisions every single day and put in long hours and then, when they're done, devote more time and energy and creativity and effort to the Academy. They give up their weekends and holidays with their families to do that. All we've accomplished has really been done by these people, and our success is really based on that.”

Dr. Nielsen said while it will be most important for the staff to help on board Dr. Denney, he also outlined how he spends his days to give Denney a sort of playbook to which he can refer. “I kept a log of how I spend my days—where I traveled, how I spent my days for the last year-and-a-half—and I'll hand that off,” he said. “You can see my estimate of the hours that I spend on the College of Surgeons, the AMA, the Physician Consortium for Performance Improvement (PCPI), the CMSS and all the other alphabet soup of meetings I attend.”

He also wrote his successor an executive summary of just what goes on at the Academy.

“I wrote it so he could read through it within 30 minutes and get a fair overview of what the Academy does,” he said.

“I want this to go so smoothly that next year at this time, people say, ‘Is he gone? I didn't realize that,’” Dr. Nielsen said.

The Future

From here, Dr. Nielsen said he has a lot of options, but no formal plan in place.

“I'd like to serve a mission for the (Mormon) church with my wife, Rebecca,” Dr. Nielsen said. “And since all of our four children and 12 grandchildren have moved back to Arizona within 50 miles of each other, it's time to get back there to see them.”

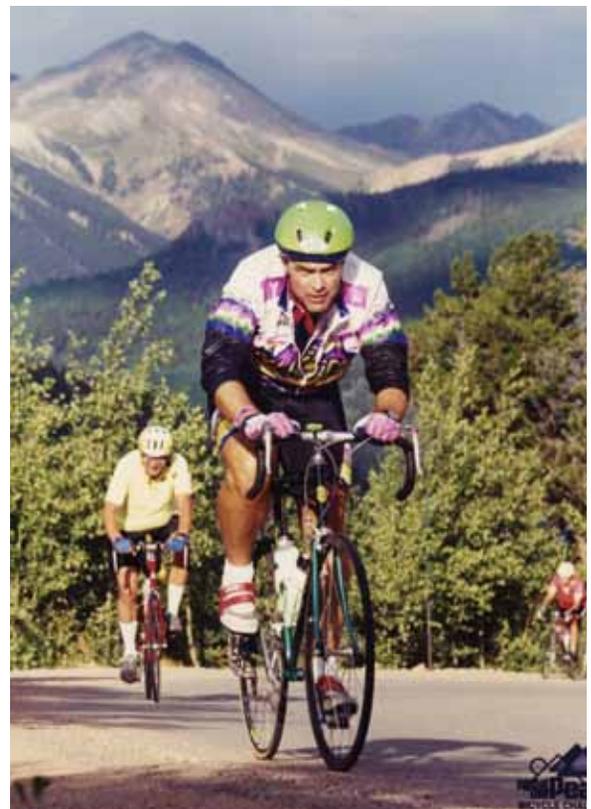
On the work front, Dr. Nielsen said it is too early to tell what he's going to do next.

“Right now I have plenty of work to do for 2015,” he said. “I'll be busy fulfilling obligations (to organizations such as PCPI and CMSS).”

But he does say this with certainty to the members, “I have spent more than a decade in your debt for the honor of being allowed to serve with our excellent staff and our outstanding specialty leaders. And between now and the end of the year, it will be time for me to perform the last responsibility of a leader—to say thank you.

“Thank you for your membership in the Academy. Thank you for your trust—in me, in your fellow Academy members, in your leaders, and in your staff. And most of all, thank you for your dedication to medicine and to your patients.”

And now, it is our turn to say thank you to Dr. Nielsen, Thank you for sharing and caring. Thank you for your knowledge and vision, for your passion and dedication. Thank you for making a difference and for helping to ensure that when the next generation comes along, we hand them tomorrow's Academy.





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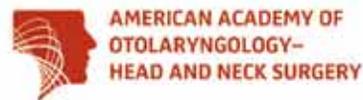
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2014-2015 Committee Roster

The following are the committee rosters of the Academy and Foundation, grouped by their clusters. These are all members, unless otherwise noted who were appointed to terms October 1, 2014, as well as those continuing their service. The number following each name indicates end of their term.

If you would like to serve on a committee, applications are now being accepted through February 3, 2015.

To review up-to-date committee rosters, learn more about the application process, or submit an application to join a committee, please visit www.entnet.org/committees.

* Denotes a Non-Voting Member of the Committee

Standing and Board Steering Committees

Articles of Incorporation and Bylaws Committee

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The 2014 CORE Study Section was listed in the July edition of the Bulletin. The 2015 section will not be confirmed until early 2015 and will be listed in a later edition.

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CENTRALIZED OTOLARYNGOLOGY RESEARCH EFFORTS

Submission Deadlines Letter of Intent (LOI) to be submitted electronically by December 15, 2014 midnight ET
Application to be submitted electronically by January 15, 2015 midnight ET

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\$820,000
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THE CORE
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THE ALCON FOUNDATION

AAO-HNSF Resident Research Grant sponsored by The Alcon Foundation
\$10,000, non-renewable, one year to complete project.
One available annually.

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AAO-HNSF Maureen Hannley Research Grant \$50,000, renewable, one to two years to complete project. One available annually.

AAO-HNSF Percy Memorial Research Award
\$25,000, non-renewable, one year to complete project. One available annually.

AAO-HNSF Health Services Research Grant
\$10,000, non-renewable, one year to complete project. Up to two available annually.

AAO-HNSF Bobby R. Alford Endowed Research Grant
\$30,000, non-renewable, one year to complete project.
One available.

AMERICAN HEAD AND NECK SOCIETY (AHNS)

AHNS Pilot Grant \$10,000, non-renewable, one year to complete project. One available annually.

AHNS Alando J. Ballantyne Resident Research Pilot Grant
\$10,000, non-renewable, one year to complete project.
One available annually.

AHNS/AAO-HNSF Young Investigator Combined Award
\$40,000 (\$20,000 per year), non-renewable, two years to complete project. One available annually.

AHNS/AAO-HNSF Translational Innovator Combined Award
\$80,000 (\$40,000 per year), non-renewable, two years to complete project. One available annually.

AMERICAN RHINOLOGIC SOCIETY (ARS)

ARS New Investigator Award \$25,000 (\$12,500 per year), non-renewable, two years to complete project. One available annually.

ARS Resident Research Grant \$8,000, non-renewable, one year to complete project. Two available annually.

AMERICAN SOCIETY OF PEDIATRIC OTOLARYNGOLOGY (ASPO)

ASPO Dustin Micah Harper Recurrent Respiratory Papillomatosis Research Grant
\$10,000, non-renewable, one year to complete project. One available annually.

ASPO Research Career Development Award
\$40,000, non-renewable, one to two years to complete project. One available annually.

ASPO Research Grant \$20,000, non-renewable, one year to complete project. Two available annually.

ASSOCIATION OF MIGRAINE DISORDERS (AMD)

AMD Resident Research Grant \$5,000, non-renewable, one year to complete project. One available annually

AMD Research Grant \$50,000, non-renewable, one year to complete project. One available annually

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AAO-HSNF Resident Research Grant sponsored by Cook Medical \$10,000, non-renewable, one year to complete project. One available annually.

THE EDUCATIONAL AND RESEARCH FOUNDATION FOR THE AMERICAN ACADEMY OF FACIAL PLASTIC AND RECONSTRUCTIVE SURGERY (AAFPRS)

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AAFPRS Leslie Bernstein Resident Research Grant
\$5,000, non-renewable, up to two years to complete project.
Two available annually.

AAFPRS Leslie Bernstein Investigator Development Grant
\$15,000, non-renewable, up to three years to complete project.
One available annually.

AAFPRS Research Scholar Award
\$30,000, renewable, may receive grant in second and third year, up to three years to complete project. One available annually.

THE OTICON FOUNDATION

AAO-HNSF Resident Research Grant sponsored by the Oticon Foundation \$10,000, non-renewable, one year to complete project. One available annually.

New Audiology Bill Seeks 'Physician' Status

On July 31, U.S. Representative Lynn Jenkins (R-KS-2) introduced a “kitchen sink” audiology bill (H.R. 5304) in Congress. Spearheaded by the Academy of Doctors of Audiology (ADA), H.R. 5304 is the most far-reaching attempt yet by those in the audiology community to achieve their goal of being recognized as the primary providers of hearing healthcare services. If enacted, H.R. 5304 would:

- Grant audiologists unlimited direct access to Medicare patients without a physician referral, and
- Amend Title XVIII of the Social Security Act to grant audiologists “limited license physician” status within the Medicare program.

Due to the advocacy efforts of the AAO-HNS, support for the direct access issue is waning on Capitol Hill. However, ADA continues to “up the ante” with its efforts to redefine a physician. The inclusion of “limited license physician” status in H.R. 5304 essentially ignores the physician referral and oversight requirements established by Medicare to control unnecessary costs and protect patient safety. While valued healthcare providers, audiologists are *not* physicians, and their training is *not* equal to those with an MD/DO degree.

If you are interested in becoming more involved in the Academy's legislative advocacy efforts, consider joining the ENT Advocacy Network by emailing govtaffairs@entnet.org.

Further, the provision included in H.R. 5304 stipulating the inclusion of audiologists in Medicare's definition of “physician” undermines a training distinction that helps patients decipher between various hearing healthcare providers. This distinction is particularly important given the broadened healthcare nomenclature resulting in various non-physician providers with doctoral degrees identifying themselves as a “doctor.”

We are not alone in our fight to defeat this ill-advised proposal. Following the introduction of H.R. 5304, the AAO-HNS circulated a sign-on letter that outlined our position and sought support from various local, state, and national medical organizations. At its closing, the letter had garnered 118 signatories and helped reiterate our strong opposition to Capitol Hill.

Despite the AAO-HNS' strong opposition to H.R. 5304, we remain committed to working with others in the hearing healthcare community to ensure patients have appropriate access to care. In particular, the AAO-HNS most recently collaborated with the American Speech-Language-Hearing Association (ASHA) prior to the introduction of their “comprehensive audiology benefit” legislation, H.R. 2330. As a result of this collaboration, our organization has been able to support ASHA's proposal. H.R. 2330 represents a pragmatic approach to expanding certain audiology services without undermining a “team-based” care approach to hearing healthcare services or jeopardizing patient care.

As we near the end of the year, the AAO-HNS Government Affairs team is

already preparing to combat additional audiology scope expansion attempts in the upcoming 114th Congress. If you are interested in becoming more involved in the Academy's legislative advocacy efforts, consider joining the ENT Advocacy Network by emailing govtaffairs@entnet.org. Members of the Advocacy Network are often the first to receive updates regarding the AAO-HNS' legisla-

tive priorities via legislative action alerts and/or the bi-weekly newsletter, *The ENT Advocate*. 



WANTED: State Trackers for 2015

The AAO-HNS sincerely thanks its member-volunteer “state trackers” for their impressive efforts during the 2014 legislative session to effectively monitor issues and trends important to the specialty, your practices, and your patients. Join the growing team of AAO-HNS state trackers by emailing govtaffairs@entnet.org to receive daily or weekly legislative tracking updates in time for the 2015 sessions. An introductory conference call is scheduled for December, so act now and be an advocate for your state!



Visit entnet.org/bulletin to read the Government Affairs Highlights from the AAO-HNSF 2014 Annual Meeting & OTO EXPOSM

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SCIENTIFIC ORAL & POSTER

Submission Opens: January 19, 2015
Submission Closes: February 16, 2015
Notifications Sent: April 2015

Measuring Physician Performance

Rahul K. Shah, MD
*George Washington University School of
 Medicine*
*Children's National Medical Center,
 Washington, DC*

We often speak in this column about patient safety and quality topics that are on the horizon or currently in vogue. One item that is mentioned a lot is the need for measurement. The patient safety and quality movement has had significant gains and victories in the past decade founded on a strong methodology that includes measurement. Measurement and evaluations have also started to come to providers. The Joint Commission has a mandatory evaluation tool for providers (physicians, LIPs, etc.) called the Ongoing Professional Performance Evaluation (OPPE). Hopefully, every Academy member is aware that the hospitals in which they practice are required

to complete an OPPE report on each medical staff member (physician, physician assistant, nurse practitioner, etc.) three times in a two-year cycle. Have you seen your OPPE report?

There is latitude afforded to the individual medical staff offices on how they create the OPPE, what is measured, and the action items from the reports. This freedom allows each medical staff office the ability to customize reports and drive initiatives/change in areas where they feel they would like to focus to improve patient safety and quality. For example, a medical staff office may want to focus on hand hygiene compliance, surgical site infections, or re-admission rates. Academy members should be aware that such information is collected and maintained by your medical staff office.

The OPPE is slowly emerging as a powerful tool with some excellent best practices. It is increasingly being used for credentialing and in a robust manner.

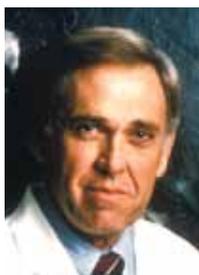
For example, I have heard of some institutions that look at an OPPE to see if there is “over-operation” for specific procedures or diagnoses; or the contrary, if a provider has not performed a specific case in more than two years, the provider may be denied privileging for that case.

As such, it is compulsory that we own our data. Academy members must be proactive and reach out to various medical staffs in the hospital where we practice to obtain OPPE reports. [b](#)

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

New 2015 CORE Grant Honors Bobby R. Alford, MD

In 2010, friends of Bobby R. Alford, MD, and many of his past residents came together to honor Dr. Alford's contributions to the specialty by establishing an endowment to support an AAO-HNSF CORE grant. This CORE grant will support innovative research in the specialty and help facilitate the career development of young investigators. This mentored research award is intended to lead to improved understanding of the



Bobby R. Alford, MD

cause or outcomes, or to novel treatments for diseases and disorders within the realm of otolaryngology-head and neck surgery.

Bobby R. Alford, MD's dedication to the specialty of otolaryngology is evidenced by his accomplishments in patient care, education, and research at the department named in his honor at Baylor College of Medicine.

Since 1962, the department Dr. Alford chaired from 1967 to 2010 trained more than 250 residents and fellows. Many have gone on to have academic positions.

Dr. Alford believes strongly in the link between research and patient care, as well as the benefits of cooperation

between the specialties of the neurosensory systems. He therefore played a significant role in the creation and development of the Neurosensory Center of Houston for The Methodist Hospital and Baylor College of Medicine. In this same vein, Dr. Alford also advocates for a close relationship between otolaryngology and audiology and encourages joint research.

His efforts to encourage cross-disciplinary research also involve the U.S. space programs National Space Biomedical Research Institute established by NASA in 1997, where he served as its initial CEO. To learn more visit www.entnet.org/core. [b](#)

Academy Unveils the 2014 Socioeconomic Survey Results: Where Do You Fit?

Since 1997, the Academy, through its Health Policy Team, has disseminated a Socioeconomic Survey every three years to all members (excluding military, retirees, and those in training). The survey is an important tool for gathering information on members' practice patterns, the healthcare environment, and future trends in otolaryngology-head and neck surgery. The data collected enables the Academy to help provide members with useful benchmarking tools as well as identifying trends in different practice areas.

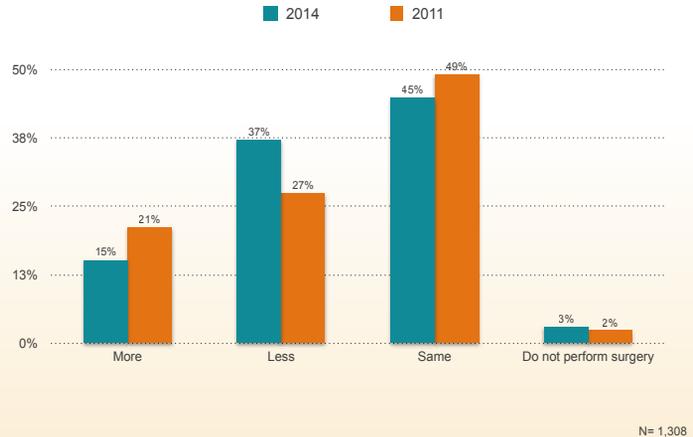
This year marked no exception and the Academy is pleased to announce that the results are now available to the membership at-large. To the right is a brief glimpse of some of the results obtained, with a more detailed analysis provided online. Members are encouraged to view the latest data on productivity, revenue, operations, and other practice patterns for the specialty by viewing the full results on the Academy's Socioeconomic page at www.entnet.org/content/socioeconomic-data.

Call for 2015 AAO-HNS Election Candidates

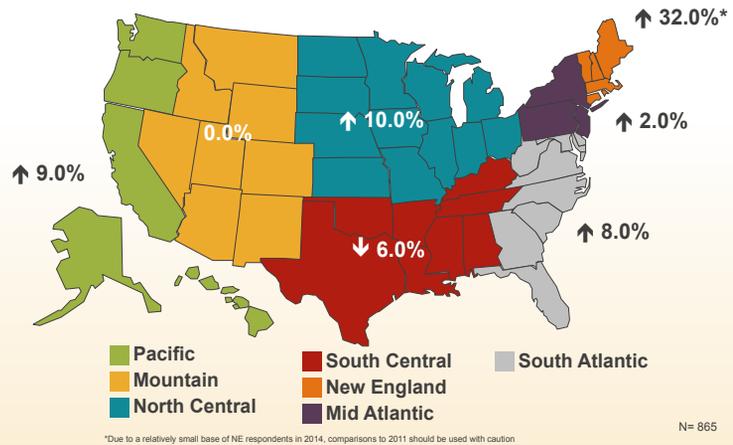
The Nominating Committee of the Academy is calling for recommendations of individuals to be considered for an AAO-HNS elective office. Academy members must be in good standing, have proven leadership ability, be active in the Academy, be familiar with the strategic direction of the Academy, and be able to dedicate the necessary time to serve. Please complete the application packet of materials and submit to any member of the Nominating Committee requesting he or she support your nomination for elected office. For more information and the application packet, please visit www.entnet.org/content/annual-election.

Application deadline is December 7, 2014. No extensions permitted.

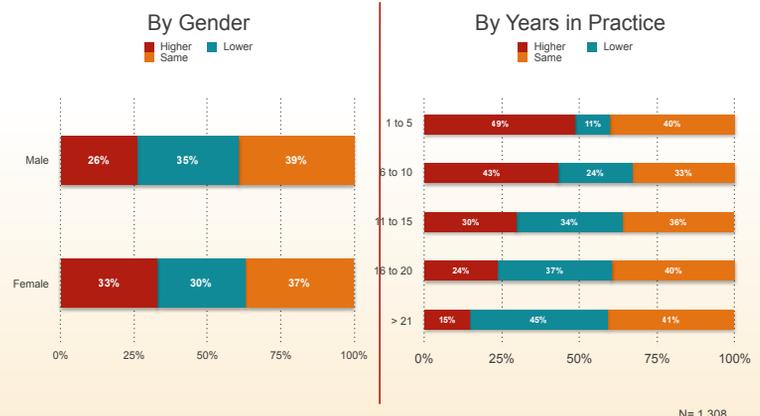
EXPECTED NUMBER OF SURGERIES COMPARED TO LAST YEAR



CHANGE IN MEDIAN INCOME BY REGION (2010 TO 2013)



PERSONAL INCOME (2013 VS. 2012)



Download AcademyQ® App Update

During this year's Annual Meeting, the Foundation launched an update to one of AAO-HNSF's most successful and widely used education products: the AcademyQ® Knowledge Assessment app. The app update, which adds 400 additional self-assessment questions to AcademyQ®, is expected to become a favorite member education resource and provide much-needed board exam preparation services to our members and the greater healthcare community alike. The tool is an invaluable resource in ensuring

AcademyQ® has been an amazing tool to help study and prepare for the in-service exam while on the go.

—Kanwar Kelley, MD

that our physicians remain educated in the most up-to-date treatments and that the highest quality-of-care is being delivered to our patients. Each of the 800 questions contained within AcademyQ® was designed by content experts from our membership and underwent a rigorous peer-review process with the assistance of committee members from the AAO-HNSF's eight education committees. The app also provides answer rationales for each of these questions along with hyperlinked references to allow for additional reading outside of AcademyQ®.

The AAO-HNSF also unveiled a newly-designed android version of the app during this year's Annual Meeting which will allow AcademyQ® to reach more of our practicing Otolaryngology community than ever before. Both versions of the app, which were designed to work on tablets as well

Overall I was very satisfied with AcademyQ® and would recommend it to anyone preparing for recertification.

—Romaine Johnson, MD

as smartphones, are available as a free download with 10 sample questions which can be upgraded to include either, or both, of the existing 400-question sets for \$49.99 each. Since its launch in September 2012, iPhone and iPad users have downloaded the free app 8,100 times and 1,056 individuals have purchased the full app. We hope to continue serving the needs of our users and build upon the success of this product with new question packs released bi-annually as well as additional features, upgrades, and enhancements. Both products can be downloaded directly from a user's smart phone or tablet by visiting either the Google Play store for Android users or from the iTunes store for Apple users. For more information visit www.entnet.org/academyq.

Learning a Hard Lesson in Choosing Patients: Management of Endemic Goiter in Gitwe, Rwanda

Read more online.

*Jeremiah C. Tracy, MD, and Jagdish Dhingra, MD, FRCS
Humanitarian Travel Grant Awardee
Tufts Medical Center*

During the last 20 years, Rwanda has made great strides. It has the highest literacy rate in central Africa, and incentives to international investors have led to a rapid increase in the nation's GDP. Despite these advances, the country's medical system lags behind. At the premier hospital in the nation's capital, King Faisal Hospital, there is not a single otolaryngologist on staff.

Medical Missions for Children (MMFC) has led mission trips to the town of Gitwe, Rwanda, since 2004. In collaboration with local contacts, this site is now a fully functioning hospital with six general practitioners and two obstetricians. A new

medical school (Rwanda's second) is being built nearby. MMFC now runs several trips to Gitwe Hospital each year, providing surgical care to the people in the surrounding region. In March 2014 I was able to join an annual trip to this site; offering surgical treatment for patients suffering from endemic goiter. Rwanda is an iodine deficient region. Although an iodination program is in place, many families live as subsistence farmers and do not typically purchase food from a store. In addition, the local diet is comprised in large part by goitrogens (casava, potatoes, cabbage).

As a resident, it was a great exercise for me to think through the diagnostic work-up under absolutely minimal conditions. On the first day, 60 patients were found to be good surgical candidates. We knew that we had the time, supplies, and stamina to take care of only 30 at most; and new patients

continued to show up daily. On days one and two, I was involved only in the operative and post-operative care of patients; and things went quite well. On Day three, my role was expanded. As usual, we had twice the scheduled number of patients show up. Dr. Dhingra told me, "Go ahead, take a history, examine them, and decide who we should operate on." This entailed choosing who amongst many would have surgery; and who would have to come back next year.

I didn't want to turn people away. I wanted to operate all night long. We discussed the safe allocation of resources. I was forced to acknowledge our inability to help every patient. Those discussions were the most difficult I've had in my young career.

As residents in America we are often sheltered from the actual decision making. This was an invaluable lesson, both as a physician and as a human being.

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A Parable on the Virtues of Sharing Your Talents

*Sharon Gnagi, MD
Humanitarian Travel Grant Awardee
Mayo Clinic, AZ*

As a medical student at UTMB-Galveston, I promised that one day I would join my mentor, **Harold Pine, MD**, and then resident, Viet Pham, MD, on their annual mission trip to Vietnam through Resource Exchange International (REI). This year, I had the opportunity to fulfill that promise along with **Dayton Young, MD**, on Dr. Pine's 11th trip to Vietnam via scholarships through my residency program at Mayo Clinic Arizona and the AAO-HNSF humanitarian travel grant.

The mission of REI is to "build people to build a nation." With that in mind, we travelled to Ho Chi Minh City and Hanoi, Vietnam, with the primary goal to help educate Vietnamese physicians. Mornings were spent collaborating with local physicians in the operating room, clinic, or hospital rounds while the afternoons were spent

in packed auditoriums lecturing to eager Vietnamese residents, medical students, and attending physicians. One of the local favorites was education regarding button batteries, their injuries, and management, as these are becoming increasingly common as the technology of Vietnam advances.

We also had a special educational conference to focus on leadership with team-building exercises. During this time, a resident shared with me that they make \$10 U.S. per month. In addition to teaching me perspective, certainly they taught me many creative ways to manage difficult clinical scenarios with limited resources.

During my time in Vietnam, I visited Tao Dan Park, where each morning it is customary for men to bring their songbirds together. This is an extremely popular custom in Vietnam, and old men sit around the park talking, enjoying coffee, and listening to the birds learn new songs. You see, at home alone, the songbirds will not sing. But each morning at this park, the air is filled with the chirping and cooing



The marshmallow challenge had teams work together for success.

of each bird learning new melodies from its neighbors. Each bird leaves with a more beautiful and diverse repertoire. The tragedy is truly the bird not able attend.

As physicians and surgeons, are we not similar to the birds of Tao Dan Park? When we come together, each of us learns new medical information, surgical techniques, and ideas for further research making our medical community better each time. I encourage you to fly around the world and share your songs—you'll be happy you did, and learn a few songs yourself. [b](#)

Balkan Congress of ORL-HNS, Budva, Montenegro

Eugene N. Myers, MD, FRCS Ed (Hon.)

This past summer, beautiful Budva, Montenegro, was the site of the IX Balkan Congress of

Otorhinolaryngology-Head and Neck Surgery. The Hotel Mediterranean was the venue for this meeting, sponsored under the auspices of the government of Montenegro and its Ministry of Health.

In the opening ceremony, the Congress President, Prof. Vladan Knezevic, MD, welcomed the delegates. Prof. Metin Onerci, MD, president of the Turkish Society of Otolaryngology Head and Neck Surgery, and Prof. Milan Stankovic, MD, president of the scientific program, gave their perspectives on the history of Balkan otolaryngology and international relationships.

Honorary President of the Balkan Society of

Otolaryngology Eugene N. Myers, MD, FRCS Ed (Hon), who is the AAO-HNSF Regional Advisor to the Balkans. He also gave a special invited lecture on the contemporary treatment of cancer of the parotid gland.

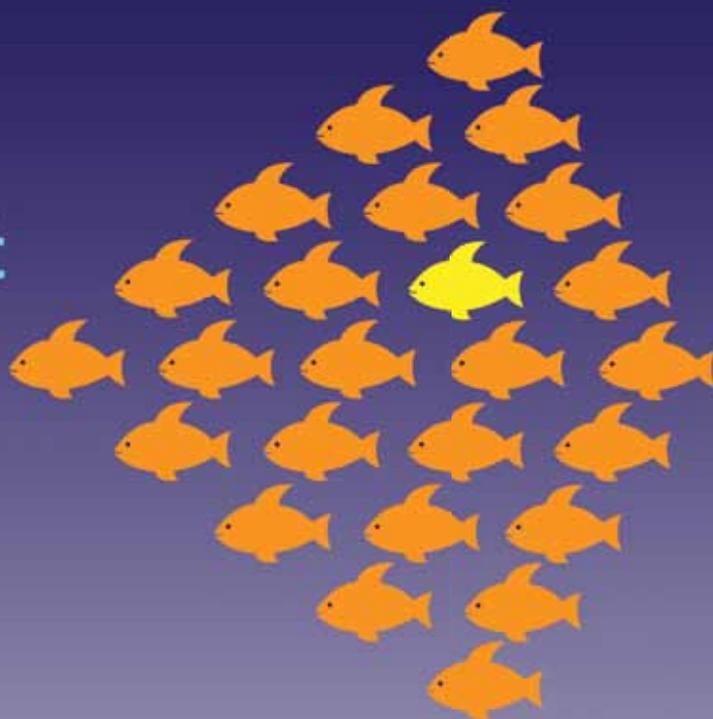
There were 320 participants from Balkan countries including Slovenia and Croatia, as well as distinguished guests from Belgium, Germany, Poland, the UK, and the U.S. Prof. Stankovic organized a well-balanced scientific program, which was entirely in English. The program included 14 roundtables, 64 invited lectures and instructional courses, 77 free papers, and 55 posters. Also at the meeting, the 10th anniversary of the Bulgarian Rhinologic Society was celebrated under the direction of Prof. Dilyana Vicheva, MD. [b](#)



Montenegrin folk dancers at the gala dinner.

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—David R. Nielsen, MD, 2012



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Dan Bruegger, MD, Associate Professor and Interim Chairman
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Billings Clinic is seeking two BE/BC physicians to join our department of Otolaryngology. Join six otolaryngologists who practice General Otolaryngology and subspecialties in Facial Plastics, Head and Neck Surgery, Laryngology and Rhinology. Our dynamic team provides comprehensive specialized care to patients in our region.

- Call 1:4
- Modern facilities equipped with EMR
- Research Center including Analytical Lab
- Established support staff
- Region's tertiary referral center
- Nationally recognized for clinical excellence



Billings Clinic is a multi-specialty, physician-led organization and a proud member of the **Mayo Clinic Care Network**. Located in the magnificent Rocky Mountains in Billings, Montana, this friendly college community has great schools, safe neighborhoods and family activities. Exciting outdoor recreation minutes from home. 300 days of sunshine!

*Integrated Medicine
 in Montana*

Contact: Rochelle Woods
 1-888-554-5922
physicianrecruiter@billingsclinic.org
www.billingsclinic.com

FULL TIME ACADEMIC FACULTY POSITIONS

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

Pediatric Otolaryngologist

Candidate must be trained in all aspects of pediatric otolaryngology surgery.

Responsibilities include participation in an active pediatric otolaryngology practice, and teaching residents and medical students. Rank and salary will be commensurate with level of experience.

Laryngologist

Candidate must be trained in treating all aspects of voice, swallowing and airway disorders.

Responsibilities include participation in an active laryngology practice, and teaching residents and medical students. Rank and salary will be commensurate with level of experience.

Indiana University is an EEO/AA employer, M/F/D/V.

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

Marion Everett Couch, MD PhD MBA
 Richard Miyamoto Professor and Chair
 Department of Otolaryngology – Head & Neck Surgery
 Indiana University School of Medicine
 Gatch Hall • 841 Clinical Drive, Suite 200 • Indianapolis, IN 46202 • smaxwell@iupui.edu



SCHOOL OF MEDICINE

INDIANA UNIVERSITY



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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The Division of Pediatric Otolaryngology at Miami Children's Hospital (“MCH”) is seeking a third, hospital-employed, fellowship-trained

Pediatric Otolaryngologist

with a particular interest in complex airway disorders to join a multi-specialty pediatric hospital in Miami, FL.

About Miami Children's Hospital

As the leader in pediatric care in South Florida, Miami Children's Hospital is committed to providing hope and world class service to the children and families of the community. Founded in 1950, Miami Children's Hospital is South Florida's only licensed free-standing specialty hospital exclusively for children, with more than 650 attending physicians and over 130 pediatric sub-specialists. A 289-bed hospital, MCH is renowned for excellence in all aspects of pediatric medicine with ten (10) specialty programs ranked among the best in the nation in the 2013-14 rankings by U.S. News & World Report. The hospital is also home to the largest pediatric teaching program in the southeastern United States and has been designated an American Nurses Credentialing Center (ANCC) Magnet facility, the nursing profession's most prestigious institutional honor.

As an “Employer of Choice”, MCH offers competitive salary and benefits package that includes relocation, malpractice coverage, health, life, dental, CME, pension plan, 403B retirement plan, licensure and dues allowance.

About the Opportunity

The Division of Pediatric Otolaryngology specializes in the treatment of routine and complex conditions of the ear, nose and throat, including the evaluation and management of sleep apnea, otologic and sinonasal disease, head and neck tumors and complex airway disorders. The practice is one of the busiest at Miami Children's with over 25,000 visits and more than 4,000 surgeries per year.

We treat a diverse and international population with a wide-range of disorders. Given our location, we have become a tertiary care provider for many hospitals and patients in Central/South America and the Caribbean. With the full support of Miami Children's Hospital, the candidate would be integral in developing and growing a complex airway disorders program to serve our diverse patient population.

Interested applicants should submit curriculum vitae and letter of interest to:

Sandeep Dave, MD, Division of Pediatric Otolaryngology, Miami Children's Hospital, through joyce.berger@mch.com.



Leading South Florida Healthcare System Seeks Pediatric Otolaryngologist

About the Opportunity:

The Division of Pediatric Otolaryngology–Head and Neck Surgery at Joe DiMaggio Children’s Hospital seeks a motivated BC/BE fellowship-trained pediatric otolaryngologist interested in growing our rapidly expanding tertiary care division. This is a robust outpatient and hospital-based program, with dedicated pediatric audiology, mid-level practitioners and a diverse patient population. Our services include an established aerodigestive team, a Cochlear Implant Center, pediatric videostroboscopy and the busiest Craniofacial Center in Florida. Qualified candidates should have an interest in head and neck surgery, airway, vascular malformations or otology. Excellent opportunities exist for interdisciplinary collaboration, program development, research and teaching. We also have a new affiliation with a four year allopathic medical school. Emergency room call is 1:7. This is a full-time employed position within the multi-specialty Memorial Physician Group. The position offers competitive benefits, and a compensation package that is commensurate with training and experience. Professional malpractice and medical liability is covered under sovereign immunity.

About Joe DiMaggio Children’s Hospital:

Joe DiMaggio Children’s Hospital (JDCH) is a 204-bed facility with a 22-bed Pediatric Intensive Care Unit and a 64-bed Level III Neonatal Intensive Care Unit, which is expanding to 80+ beds in 2015. JDCH opened in 1992 and is located in Hollywood, Florida. As South Florida’s newest freestanding children’s hospital, Joe DiMaggio Children’s Hospital is redefining the pediatric healthcare experience. We combine cutting-edge excellence with a commitment to patient- and family-centered care, and have the largest and most diverse group of board-certified pediatric specialists in the region. Thanks to exemplary medical expertise, advanced technology and exclusive pediatric programs, JDCH has earned the distinction of being the leading children's hospital in Broward and Palm Beach counties. JDCH is the only Pediatric Trauma Center in south Broward County. We’re continuing to pioneer revolutionary programs that define the standard in pediatric care. To learn more, please visit JDCH.com.

About South Florida:

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

Joe DiMaggio  Children’s Hospital
AT MEMORIAL

1005 Joe DiMaggio Drive / Hollywood, Florida 33021



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



South Florida ENT Associates, P.A.

South Florida ENT Associates, a fifty-two physician group practice in Miami-Dade, Broward and Palm Beach has immediate openings for full-time ENT Physicians. South Florida ENT Associates is the second largest ENT group in the country and the largest in the state of Florida. We provide full service ENT including Audiology, Hearing Aid Sales, Allergy, Facial Plastics, Robotics and CT services.

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

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

This position will include both office and hospital settings.

Requirements:

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

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

Contact Information:

Contact name: Stacey Citrin, CEO
 Phone: (305) 558-3724 • Cellular: (954) 803-9511
 E-mail: scitrin@southfloridaent.com

Pediatric Otolaryngologist Faculty Advertisement

The Department of Otolaryngology - Head and Neck Surgery at Saint Louis University, a Catholic, Jesuit institution dedicated to student learning, research, health care and service is currently seeking applications for a Fellowship Trained Pediatric Otolaryngologist. The position is based at the Sisters of St. Mary Cardinal Glennon Children's Medical Center. Appointment in Pediatric Otolaryngology is available at the level of Assistant/Associate Professor. Candidates must be Board Certified in Otolaryngology - Head and Neck Surgery.

SSM Cardinal Glennon Children's Medical Center is a 160-bed free-standing hospital located in midtown Saint Louis, adjacent to Saint Louis University and Saint Louis University Hospital. The Hospital serves a diverse population from the inner city, the metropolitan area and a 200-mile referral radius. St. Louis is an urban center with a population of 2½ million and ample cultural, sports and entertainment opportunities.

Interested candidates must submit a cover letter, application and current curriculum vitae to: <https://jobs.slu.edu>. Review of applications begins immediately and continues until the position is filled. For further information contact:

Mark A Varvares, M.D., Chairman
 Department of Otolaryngology – Head and Neck Surgery
 Saint Louis University School of Medicine
 3635 Vista at Grand Boulevard
 6th fl, FDT
 St. Louis, MO 63110-0360
varvares@slu.edu

Saint Louis University is an affirmative action, equal opportunity employer and encourages nominations and applications of women and minorities.

Head and Neck Surgery Opening with Leadership Potential

Southern Illinois University School of Medicine in Springfield, Illinois is seeking a leader in Otolaryngology Head and Neck Surgery to join their growing academic practice at the Assistant or Associate Professor level. Leadership opportunities available for qualified candidates. This is an exciting time to be part of a distinguished program with an established and robust practice in head and neck oncology, endocrine surgery, microvascular and Mohs reconstruction and robotic surgery.

The Division currently has eight faculty members and four community faculty affiliated with the residency program, training two residents each year. Teaching of surgical residents and medical students in an institution committed to educational excellence is emphasized. A new,

state-of-the art surgical skills training center opens in 2015, providing teaching opportunities including image-guided and robotic surgery. Clinical and basic science research opportunities available at the Carol Jo Vecchie Women's and Children's Hospital, the SIU-Simmons Cancer Institute and within the Division that has had continuous NIH-funded research for over 25 years.

SIU SOM is affiliated with Memorial Medical Center and St John's Hospital, serving a catchment area of over 2 million. The Simmons Cancer Institute at SIU is a regional referral center providing multidisciplinary oncology care and houses a research facility with state of the art imaging, tumor repository, and flow cytometry.

This position is approximately 50% clinical, 20% teaching, 20% research and 10% administrative.

Highlights of the position and area:

- Promoting the specialty of head and neck oncology as a tertiary referral service.
- Assisting in development of highly functional organ site working group (OSWG) within the Simmons Cancer Institute (SCI).
- In addition to teaching medical students/residents, provide head and neck oncology education to SIU-SOM faculty, nurses, and allied health professionals.
- A highly competitive salary, excellent benefits package and University funded malpractice plan.
- Great work/life balance in Springfield, IL, a "Top Places to Live" community. Family oriented neighborhoods, excellent schools, affordable housing and abundance of cultural and recreational activities.
- Easy access to Chicago and St. Louis.

To learn more, contact:
 Matt Jordan, Senior Consultant
 Jordan Search Consultants
 636-294-6085 • mjordan@jordansc.com • www.jordansc.com/jordansc.com



Southern Illinois University School of Medicine is an Affirmative Action/EOE and provides equal employment and educational opportunities for all qualified persons without regard to race, color, religion, sex, national origin, age, disability, genetic information, sexual orientation, protected veteran status or marital status in accordance with local, state and federal law.

Live. Work. Play.

Leading South Florida Healthcare System Seeks Medical Director, Division of Otolaryngology

About the Opportunity:

Memorial Healthcare System is seeking a Medical Director for the Division of Otolaryngology. The Memorial Physician Group currently employs two otolaryngologists supporting an established otolaryngology outpatient practice, inpatient hospital consults, and emergency room call.

Successful candidates will meet the following criteria:

- Fellowship training in head and neck surgery required
- Board certified in otolaryngology
- Minimum of five years leadership experience required
- Experienced in evidence-based medicine
- Excellent communication, interpersonal and team leadership skills demonstrated
- Achieved success in new program development and the establishment of policies and guidelines to monitor effectiveness of medical care, evidence-based clinical outcomes, and patient progress

This is a full-time employed position with the multi-specialty Memorial Physician Group. The position offers a highly competitive and desirable compensation/benefits package that is commensurate with training, experience and market demand. Professional malpractice and medical liability is covered under sovereign immunity.

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

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



University of Missouri

Department of Otolaryngology—
Head and Neck Surgery

Seeks clinicians, teachers, and researchers who are personable, energetic and innovative to join a rapidly growing and collaborative group of physicians. Faculty opportunities at all academic levels (Assistant/Associate Professor or Assistant/Associate Professor of Clinical Otolaryngology) are available in **General Otolaryngology with interest in Pediatrics or Allergy**. Title, track, and salary are commensurate with experience.

- Competitive production incentive
- Research interests encouraged and supported
- New outpatient clinic with state-of-the-art equipment and ancillary services
- Well established and expanding hospital system
- Live and work in Columbia, ranked by *Money* magazine and *Outside* magazine as one of the best cities in the U.S.

For additional information about the position, please contact:

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

To apply for a position, please visit the MU web site at
hrs.missouri.edu/find-a-job/academic/

The University of Missouri is an Equal Opportunity/Access/Affirmative Action/Pro Disabled & Veteran Employer.

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 **December 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/~brpm/r67.htm>



SCHOOL OF MEDICINE
CASE WESTERN RESERVE
UNIVERSITY



University Hospitals



Rainbow Babies
& Children's Hospital

Academic Pediatric Otolaryngologist Opportunity

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

Due to increased patient demand and institutional support for expansion, the Division of Pediatric Otolaryngology in the Department of Otolaryngology - Head and Neck Surgery at Rainbow Babies and Children's Hospital/University Hospitals Case Medical Center in Cleveland, Ohio is seeking to add the following full time academic faculty position:

Pediatric Otolaryngologist (fellowship trained)

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

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

Todd Otteson, MD, MPH
Chief, Division of Pediatric Otolaryngology
Rainbow Babies and Children's Hospital
James E. Arnold and Tom and Nancy Seitz Chair in Pediatric Otolaryngology
University Hospitals Case Medical Center
c/o Kim Kuivila
11 100 Euclid Avenue
Mailstop LKS5045
Cleveland, OH 44106

DEPARTMENT OF OTORHINOLARYNGOLOGY
UNIVERSITY OF OKLAHOMA HEALTH SCIENCES

POSITION AVAILABLE: RHINOLOGIST
DATE AVAILABLE: IMMEDIATELY

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

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

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

Letters of interest with accompanying CV should be directed to: Greg A. Krempf, M.D., F.A.C.S., Attn: Nancy Geiger, Department of Otorhinolaryngology, P.O. Box 26901, Williams Pavilion 1290, Oklahoma City, OK 73126-0901 or via email to nancy-geiger@ouhsc.edu.

The University of Oklahoma is an Affirmative Action and Equal Opportunity Employer. Individuals with disabilities and protected veterans are encouraged to apply.



THE
UNIVERSITY
OF UTAH

General Otolaryngologist

University of Utah Otolaryngology-Head & Neck Surgery seeks BC/BE faculty with an interest in general otolaryngology. This is a full-time clinical track position at the Assistant Professor level. Responsibilities will include teaching, research and clinical care in our community clinics. Position available July 2015.

The University of Utah is an Equal Opportunity/ Affirmative Action employer and educator. Minorities, women, and persons with disabilities are strongly encouraged to apply. Veterans preference. Reasonable accommodations provided. For additional information: <http://www.regulations.utah.edu/humanResources/5-106.html>.

Applicants must apply at:

<http://utah.peopleadmin.com/postings/33694>

For additional information, contact:

Clough Shelton, MD, FACS, Professor and Chief

University of Utah School of Medicine

50 North Medical Drive 3C120

Salt Lake City, Utah 84132

Phone: (801) 581-8471 • Fax: (801) 585-5744

E-mail: emily.bird@hsc.utah.edu

OTOLARYNGOLOGIST FACULTY POSITION

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

- 1) General Otolaryngologist
- 2) Fellowship trained Pediatric Otolaryngologist

Join an established group of 6 physicians in a busy tertiary care referral center. Responsibilities include clinical care as well as student and resident education. Opportunities exist for clinical and basic science investigation and research. An academic appointment commensurate with education and training is offered. We are looking for dynamic new or recent graduates with



energy, desire, and drive to jump start their careers and help expand our scope and presence.

UMassMemorial Medical Center is situated in Worcester, MA, a community rich in history. Worcester is the second largest city in Massachusetts and New England, and has a very large patient referral base. Worcester and the surrounding area have a strong and diverse economic base with family oriented communities and excellent school systems. Boston and Providence are only forty miles away, and beaches, lakes, and mountains are all easily accessible, including Cape Cod, Martha's Vineyard, Nantucket, the Berkshires, and mountains of Vermont, New Hampshire and Maine.

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

Daniel Kim MD

Department of Otolaryngology-Head and Neck Surgery

UMassMemorial Medical Center

c/o Jennifer Pappas,

Physician Recruiter

Email: jennifer.pappas@umassmemorial.org

Phone: 774-312-0483



UMass Memorial Medical Center and the University of Massachusetts Medical School are equal opportunity employers.

**The Department of Otorhinolaryngology:
Head and Neck Surgery**



The Department of Otorhinolaryngology: Head and Neck Surgery at the Perelman School of Medicine at the University of Pennsylvania seeks candidates for an Assistant Professor position in either the non-tenure clinician-educator track or the non-tenure academic-clinician track. Track will be commensurate with experience. The successful applicant will have experience in the field of facial plastic and reconstructive surgery or other related subspecialties, with a focus on maxillofacial trauma. Responsibilities include surgical and clinical care of otolaryngology patients. Excellence in clinical practice and innovation in delivery of care, quality improvement initiatives, and regional patient referral base are desirable. Excellence in teaching, innovative teaching materials and methods, and mentoring of junior faculty is also expected. Applicants must have an M.D or M.D./Ph.D. degree and have demonstrated excellent qualifications in education and clinical care. While evidence of scholarship is required in the clinician-educator track, research is not required in the academic clinician track. Candidate should be board certified or board eligible and have subspecialty training in related areas. Participation in clinical research is encouraged.

We seek candidates who embrace and reflect diversity in the broadest sense. The University of Pennsylvania is an EOE. Minorities/Women/Individuals with disabilities/Protected Veterans are encouraged to apply.

Apply for this position online at: https://www.med.upenn.edu/apps/faculty_ad/index.php/g329/d3754



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

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

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Rush University Medical Center

**Rush University Medical Center, Chicago
Laryngologist**

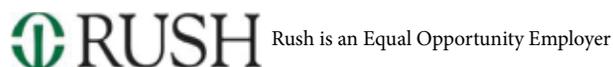
The Department of Otorhinolaryngology – Head and Neck Surgery at Rush University Medical Center, located in downtown Chicago, is seeking applicants for Section Head of Laryngology and Director of the Rush Voice, Swallowing and Airway Institute. The individual will be charged with creating a center of excellence to provide comprehensive medical and surgical care for voice and swallowing disorders. Qualified candidates must have completed a fellowship in Laryngology and be BC/BE. Candidates must possess a strong commitment to patient care, resident education, and research. Initial seed funding will be provided to develop the research component of the program. Applications will be considered eligible for faculty appointment at Assistant or Associate Professor level.

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

For further inquiries, please contact:

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

William J Krech, III
Faculty Recruiter
william_krech@rush.edu





DEPARTMENT OF SURGERY

Otolaryngology- Head & Neck Surgery

UNIVERSITY OF WISCONSIN

SCHOOL OF MEDICINE AND PUBLIC HEALTH

University of Wisconsin Hospitals and Clinics' Division of Otolaryngology - Head and Neck Surgery is a leader in teaching, research, patient care and service, and is seeking applicants for one-year clinical fellowships. The ideal candidate should have a strong interest in an academic career in Otolaryngology-Head and Neck Surgery and must demonstrate a commitment to resident and medical student education. Opportunities for both clinical and basic science research are available in the Department of Surgery and through collaboration within the School of Medicine and Public Health. The fellowships will offer a competitive salary with benefits.

Fellowship Descriptions:

Head & Neck Oncology and Microvascular Reconstructive Surgery ~ This fellowship will stress multidisciplinary management of head and neck malignancies with a primary clinical experience focused on oncologic resection and microvascular reconstruction. The fellow will also gain experience with transoral laser resection, robotic procedures, transnasal endoscopic resection, and anterior skull base surgery. The experience will offer both mentored and independent clinical responsibilities and protected research time.

Laryngology ~ This position provides a unique opportunity to interact with adult and pediatric Otolaryngologists, speech pathologists and voice researchers in a clinically active, high flow-through, multidisciplinary setting for treatment of voice, swallowing and airway disorders. Clinical experience will be comprehensive and include office evaluation, office-based procedures, and operative interventions. The applicant will learn surgical techniques for the treatment of benign and malignant vocal folds lesions, surgical and non-surgical management for neurologic, psychogenic and inflammatory disorders, swallowing dysfunction and airway stenosis. Training in video stroboscopy, high-speed video, Voice analysis, QOL, transnasal esophagoscopy, EMG, High Resolution manometry. Research participation and initiation are expected.

Applicants who will have completed a US or Canadian Otolaryngology residency should contact:

Delight Hensler

Division Otolaryngology Head & Neck Surgery

K4/719 CSC

600 Highland Avenue

Madison, WI 53792-7375

608-263-0192

Hensler@surgery.wisc.edu

For more information about the Department of Surgery, please visit our website:

<http://www.surgery.wisc.edu>

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

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



Otolaryngology

Call This Top 10 Community Home



McFarland Clinic PC

- daVinci Robot and the Olympus Video System
- In-office laryngeal biopsies
- New state-of-the-art minor procedure room
- Epic EMR System
- Weekly cancer case conference
- Established, collegial team and support staff
- Physician owned and governed
- Large, established referral network
- One of the least litigious states in the country



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



Certificate Program for Otolaryngology Personnel (CPOP)

CPOP is a three-phase training program to teach basic hearing evaluation.

For Information, contact:

Alison Devine
Michigan Ear Institute
248-865-4135 • earmei@aol.com

Registration Deadline: Nov. 21
Fee: \$1500 (includes course materials and two 1/2-day workshop). Travel & Lodging not included.

<http://www.michiganear.com/conferences-and-courses.html>

Co-coordinators:

Eric Sargent, MD (Michigan Ear Institute) &
Jeffrey Weingarten, MD (Ear, Nose & Throat Consultants)

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

This 3-phase program is designed to be a cost-effective way to increase office efficiency and provide basic audiology services. OTOTechs allow audiologists to provide advanced hearing and balance services.

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

The 3 phases of training are: 1) self study; 2) hands-on workshop; and, 3) 6-month period of supervised patient testing. **The AAO-HNS will issue a Certificate of Completion.**

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

December 5 - 7, 2014: Providence Park Hospital
Novi, Michigan

The Ohio State University Department of Otolaryngology – Head and Neck Surgery

The Ohio State University Department of Otolaryngology is accepting applications for the following faculty positions:

BC/BE Chief of Facial Plastics

BC/BE Otolaryngologist with Experience in Surgical Quality and Comparative Effectiveness Studies

BC/BE General Otolaryngologists to work in Community Practices

BC/BE Otologist/Neurotologist

Rhinology Scientist (PhD or MD/PhD)

Hearing Scientist (PhD)

Swallowing Scientist (PhD/SLP)

Applicants must demonstrate excellence in patient care, research, teaching, and clinical leadership. This is an outstanding opportunity to join one of the top ranked programs in the country. Located in the heart of Ohio, Columbus offers a population of over 1.5 million people and excellent cultural, sporting, and family activities.

Send letter of interest and CV to:

Ted Teknos, MD
Professor and Chair
The Ohio State University
Department of Otolaryngology
915 Olentangy River Rd. Suite 4000
Columbus, Ohio 43212
E-mail: mark.inman@osumc.edu
Department Administrator
Or fax to: 614-293-7292
Phone: 614-293-3470



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