

bulletin

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

JULY 2019

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Ring the bell for quality and evidence

The AAO-HNSF 2005 Annual Meeting was held in Los Angeles, CA, (where we will return in 2021). Even early in my career, I recognized the unparalleled opportunities available by getting involved in AAO-HNSF courses and panels.

These experiences, along with the guidance of my beloved mentor Bob Toohill, MD, helped me to become a good panel moderator. For one of my 2005 Annual Meeting panels, “Fact and Fiction about Glottic Injectables,” I assembled a group of (mostly) lovable laryngologists to talk about the expanding array of materials available for vocal fold augmentation. That morning, unbeknownst to them, I walked from the convention area to an office supply store to buy a few classic concierge-type bells (see picture below). As the session began, I surprised my colleagues by placing these bells on the table in front of them. I then challenged the panelists to focus on evidence-based assertions and asked them to be clear about aspects of their presentation that deviated from that standard. If a panelist felt that a speaker had violated this instruction during their presentation, they were encouraged to ring the bell. This changed everything.

The audience seemed to like the gimmick (let’s be honest, the entertainment value is usually appreciated a few days into a medical meeting). The panelists focused on what it is we know from reasonable attempts at investigation and scholarship as opposed to what we have come to personally conclude from experience in the absence of evidence. Let us be clear: All levels of evidence-based medicine can be valuable and indeed necessary in the practice of medicine. We can’t study or investigate everything and certainly can’t always do it exhaustively. Recall that the request to my panelists that day wasn’t to avoid opinion or statements based on weak or incomplete evidence but was instead a call to be candid about the presence or absence of evidence in our own scholarly presentations. As you can imagine, some of our speakers did well with nary a “ding,” and some achieved a bit less silence.

Our AAO-HNSF invests tremendous resources in the pursuit of research and products to help our patients, our community of otolaryngologists,

and of course, the greater good beyond otolaryngology-head and neck surgery. The Clinical Practice Guidelines are our most downloaded papers in all of *Otolaryngology–Head and Neck Surgery*. The CPGs are evidence-driven collaborations from a broad team of stakeholders that help us separate the helpful and often colorful aspects of experience and anecdotalism in medicine from the actual peer-reviewed evidence in important areas, such as tonsillectomy in children and evaluation of the neck mass in adults. Like most of you, I have no qualms about practicing medicine armed with a career of anecdotes and clinical sensibility—but this is not enough. As the burdens (and opportunities) of reporting on quality and cost grow, we will need more and more data and evidence to support what we do and how we take care of patients. The Reg-entSM clinical data registry is a great example of this investment made by our AAO-HNSF.

My hope is that we can continue to blend the art of medicine with the knowledge and evidence that comes from well-supported scholarship. We should recognize the difference between what we think or feel from experience and what we know from rigorous scholarship, and remember this in our discussions with patients, trainees, and fellow physicians. This is what the bell symbolizes for me. ■



Albert L. Merati, MD
AAO-HNSF President

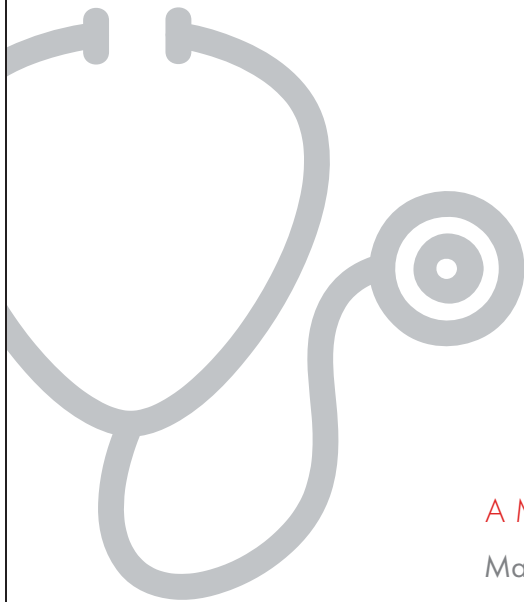
“My hope is that we can continue to blend the art of medicine with the knowledge and evidence that comes from well-supported scholarship.”



The commemorative concierge bell from the AAO-HNSF 2005 Annual Meeting panel I moderated still sits on my desk. Just behind this is a photo of the late Bob Toohill teeing off at Eagle Springs, WI, in 2002. It is one of my most cherished memories.

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Collaboration elevates all

Perhaps my favorite part of my job as your EVP/CEO is meeting and interacting with all members of the otolaryngology team who allow us to deliver the best and safest care to our patients. I uniformly learn as much or more through those interactions than from any other source.

I recently had the pleasure of attending a meeting of the academic administrators at the University of Michigan in Ann Arbor, MI. In addition to getting a much clearer picture of the challenges facing academic departments as healthcare delivery evolves, I had the privilege of hearing **Mark E. Prince, MD**, (Chair) give an overview of his department, which includes 68 physicians and 227 support staff members. What impressed me the most was not the multiple accolades his department has garnered over the last several years, but his commitment to people. He described a process of identifying and selecting “decent people” as residents, faculty, and staff, people who will “do the right thing.” Hearing this, I immediately got a flashback to my residency four decades ago when my Chair, **James B. Snow, Jr., MD**, would always ask us at key decision points, “Is it the right thing to do?”

It is encouraging to me that there is considerable interest and progress in developing optimally functioning healthcare teams in otolaryngology. That will only succeed if the members of the teams value each other’s contributions and work under an umbrella of mutual respect, trust, and congeniality to accomplish shared goals. We cannot follow the pathway currently hallmarked by political discourse in this country. Presumably, we all entered medicine to care for those mired in infirmity caused by suboptimal health, and we are fortunate to be trusted by society to do so. If we can focus on doing the right thing by our colleagues and for our patients, we will have a chance to positively influence the forthcoming changes and ensure patients will get the care they deserve.

This month’s *Bulletin* highlights research, often the most undervalued of our three operational pillars of advocacy, education, and research. Our Research and Quality Business Unit, headed

by Jean Brereton, MBA, and Coordinator for Research and Quality, **Cecelia E. Schmalbach, MD**, continues to produce the quality and performance measures otolaryngology needs to advance care across our broad specialty. The Guideline Task Force continues to produce the valuable Clinical Practice Guidelines (CPG) and Clinical Consensus Statements (CCS) that are critical in determining appropriate care and advocating for appropriate reimbursement for this care. The Patient Safety and Quality Improvement Committee has played an active role in several important initiatives over the past year, highlighted by our successful interaction with the Joint Commission relating to endoscope sterilization, surgical attire, pediatric airway cart regulations, and other issues negatively affecting our practices. The performance measures needed by our members for MIPS reporting continue to increase, and we now have 22 specialty-specific measures in our QCDR. Our CORE grant review process continues to improve every year, and record amounts of grants were given out through this process this year. This collaborative effort, involving many of our specialty societies partnering with the AAO-HNS/F, is a prime example of how working together can elevate a program. The Guideline Task Force is another great example of how specialty societies working together can help to target clinical guidelines and consensus statements and subsequently produce excellent products.

No report on quality and research would be complete without updating you on our clinical data registry, Reg-entSM. Reg-ent is moving into Phase II of operations, which will include additional data types, such as patient reported outcome measures (PROMs), additional diagnostic data, inpatient data, and utilization/cost data. We will have access to a broad-based analytic platform soon and hope to be partnering with entities that will ensure the long-term financial viability of this critical project. We are in the process of onboarding many academic practices as Epic and Cerner users now have a mechanism to participate.

Our future is much brighter due to the exceptional work of all involved in our research and quality teams. ■



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

“ Presumably, we all entered medicine to care for those mired in infirmity caused by suboptimal health, and we are fortunate to be trusted by society to do so.

”

AAO-HNSF INTERNATIONAL VISITING SCHOLARSHIP REPORT (2018)

International scholarship recipient reports on the AAO-HNSF 2018 Annual Meeting & OTO Experience

■ **Syed Salman Hashmi, MBBS**

It's a great honor for me to write this post scholarship report. In fact, it was a dream to write this report from the day I first discovered the possibility of this scholarship four years back. I never expected to be selected for such a prestigious program. This is a favor from AAO-HNS that I will never forget, and I endeavor to return this trust in the form of sharing the knowledge and skills learned at the Annual Meeting in my homeland, thus enhancing the specialty in my country.



(left to right) J. Pablo Stolovitzky, MD, AAO-HNSF Coordinator for International Affairs, and Syed Salman Hashmi, MBBS, at the AAO-HNSF 2018 Annual Meeting & OTO Experience

My time in United States started with the AAO-HNSF 2018 Annual Meeting & OTO Experience in Atlanta, Georgia. It was a wonderful academic experience. All four days were full of knowledge and wisdom from the world's leading figures of the field. As all sessions seemed important, it was hard for me to choose which ones

to attend. One of the highlights of the meeting was the network-building. I was quite successful in that by meeting as many surgeons as I could from the U.S. and other parts of the world. The meeting ended successfully, leaving a lot of memories and wishes to attend the future meetings.

The next day, I flew to New York to start my clinical attachment at NYU under **J. Thomas Roland, MD**. The next 14 days were outstanding as I was exposed to wonderful otologic and neurotologic surgeries. I was really touched by the warmth and hospitality of Dr. Roland and his team.

In our first meeting, he gave me his office keys and allowed me to use his office whenever I wanted. He was always involved in our teaching. I attended all his OR sessions, which included otologic and lateral skull base surgeries. The most exciting parts for me were the lateral skull base surgeries with the neurosurgical team. It was fascinating to observe multiple acoustic neuroma surgeries in this two-week period. This repetition aided me a lot in understanding the complex principles of the

lateral skull base surgeries. It was my first experience with this kind of surgery. I was also able to observe **Daniel Jethanamest, MD**, and **Sean O. McMenomey, MD**, in their OR sessions. They were all very kind and generous in their teaching. ■

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Making a positive impact on patient care and physician education around the world

The **AAO-HNS foundation's** International Visiting Scholarship (IVS) Grant

Program advances health education and seeks to improve the quality of patient care around the world in developing countries. Since its inception in 2009, more than 200 IVS grants have been awarded to 101 recipients in 29 countries.

IVS grants are awarded on an annual basis to a meritorious international otolaryngologist such as **Syed Salman Hashmi, MBBS**, and enable recipients to:

- Participate in the AAO-HNSF Annual Meeting & OTO Experience
- Receive \$2,000 to help defray travel costs associated with attending the Annual Meeting
- Partake in a short-term observership at a U.S. otolaryngology institution
- Receive a one-year trial membership

The reach of the IVS Grant Program is dependent upon generous donations to the **AAO-HNS foundation**. Consider making a donation today of \$2,000 in support of an IVS grant by contacting Marylou Forgione, Senior Manager/Development, at mforgione@entnet.org.

Your Academy around the world: 69th National Congress of the SMORLCCC

The 69th National Congress of the Mexican Society of Otorhinolaryngology – Head and Neck Surgery (SMORLCCC) was held April 30-May 5 in Mazatlán, Mexico. This high-level continuing medical education (CME) conference brought together specialists from Europe, Latin America, Mexico, and the United States for education and scientific interaction. ■



(left to right) J. Pablo Stolovitzky, MD, AAO-HNSF Coordinator for International Affairs; Martin Castañeda, MD, Congress Director; Jacqueline Alvarado, MD, AAO-HNSF Regional Advisor for Latin America; Rafael García Palmer, MD, member of the Congress Scientific Committee; Fermin Zubiaur, MD, Congress Secretary; and James C. Denny III, MD, AAO-HNSF EVP/CEO

HUMANITARIAN SERVICE GRANT

Peruvian children receive surgeries, education

Daniel J. Wehrmann, MD, traveled to Cusco, Peru, from July 28 to August 4, 2018, to treat the children of the Andes Mountains who suffer from cleft lips, cleft palates, and microtia. At the EsSalud Hospital on a mission sponsored by Medical Mission for Children, Dr. Wehrmann worked with a team of five American otolaryngologists and one Peruvian plastic surgeon to perform several surgeries as well as educate the people of the region. ■

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SECTION FOR RESIDENTS AND FELLOWS-IN-TRAINING

Past, present, and future

The Section for Residents and Fellows-in-Training (SRF) is composed of all residents and fellows who are currently training in an accredited program in the United States. The SRF was created in 2000 to increase trainee participation in the American Academy of Otolaryngology–Head and Neck Surgery.¹ Since its establishment, the mission of the SRF has been to link trainees with the Academy’s Board of Directors and Board of Governors (BOG). By doing so, the SRF can disseminate information from the Academy leadership and advocate for issues pertinent to training the next generation of otolaryngologists.

In 2003, the SRF created a Governing Council to lead the section. It is currently composed of the Chair, Vice Chair, Member-at-Large, Information Officer, Immediate Past Chair, BOG Governor, BOG Legislative Representative, and BOG Socioeconomic and Grassroots Representative. Each term lasts one year. Applications to serve on the Governing Council become available each summer through the Academy’s website

(<https://www.entnet.org/content/section-residents-and-fellows-training>), and elections are held at the AAO-HNSF Annual Meeting & OTO Experience that fall. Additionally, the SRF has recently created a network of resident representatives from each training program in order to improve direct communication to residents. Any resident can serve as his or her program’s resident representative and can sign up directly on the Academy’s website under the section for SRF.

One of the major initiatives that the SRF Governing Council has undertaken is to understand what issues are important to residents and fellows-in-training. Starting in 2002, the SRF has distributed an annual survey to all otolaryngologists-in-training to gauge differences in residency experiences and solicit resident or fellow input. The survey is short and consists of two parts; the first section contains questions that have remained stable over time to track trends pertaining to education debt, anticipated practice type, impact of duty hours, training experiences in the different

subspecialties, the in-service exam, and pursuit of fellowship. The second section consists of “hot topic” questions relevant to the current trainee experience, such as trainee well-being, effects of fatigue, emotional intelligence, value of research during training, and importance of exposure to the business of healthcare. The survey is traditionally distributed in the spring.

So, what does the SRF Governing Council do with the survey answers? The SRF uses the information to advocate for its constituents. A summary of the results is given to the Academy’s Board of Directors to demonstrate the current concerns and experiences of trainees. Additionally, there have been three peer-reviewed publications that have stemmed from the SRF annual survey responses. These publications have aimed to increase awareness of resident training experiences regarding duty hours, identify resident-perceived most important intern rotations, trends in post-training career choices, factors influencing the decision to pursue fellowship, and educational debt burden.¹⁻³ Thus, the SRF values the opportunity to disseminate the annual survey among trainees and the opportunity to inform the Academy leadership about the current trainee experience.

If you are a resident or fellow-in-training, we welcome you to get involved with the SRF! Make sure to check out our section page at (<https://www.entnet.org/content/section-residents-and-fellows-training>), our Facebook page (@ENT.SRF), or feel free to email us with any questions or comments at srf@entnet.org. ■



Members from the Section for Residents and Fellows-in-Training in attendance at the AAO-HNS/F 2019 Leadership Forum & BOG Spring Meeting, in Alexandria, VA, April 26-28.

References:

- 1 Rosenberg, T. L. et al. Section for residents and fellows-in-training survey results. *Otolaryngol Head Neck Surg* 148, 582-588, doi:10.1177/0194599813477353 (2013).
- 2 Roby, B. B. et al. Section for Residents and Fellows-in-Training Leaders: Where Are They Now? *Otolaryngol Head Neck Surg* 151, 6-9, doi:10.1177/0194599814532904 (2014).
- 3 Boston, M. Resident perceptions of resident duty hour standards. *Otolaryngol Head Neck Surg* 134, 537-538, doi:10.1016/j.ototns.2005.10.048 (2006).

AMERICAN OTOLOGICAL SOCIETY REPORT

Otology: What's new in 2019?

■ **John C. Carey, MD**, President-Elect,
American Otological Society

■ **Carol A. Bauer, MD**, President, American
Otological Society

We are entering the golden age of inner ear biology as scientists untangle the regulatory pathways that control the development and maintenance of hair cells and neurons. Tremendous advances have been made possible by chips that assay for hundreds or thousands of genes or proteins and by parallel advances in big data analytics that link molecules into networks. Using these techniques, multiple laboratories are busy defining the genes, proteins, and control molecules that constitute the biochemical machinery of the inner ear. This knowledge will undoubtedly open new avenues to treat previously intractable ear maladies. Recent advances have already expanded our knowledge of the role of inflammatory mediators in inner ear viral infections and middle ear cholesteatomas

and of the role of the blood-labyrinth barrier in disease and drug delivery. Indeed, the holy grail of regenerating hair cells and the more achievable goal of repairing them are inching closer as the molecular commands of inner ear function become clearer and more accessible.

As fast as these advances are coming, we still face a tidal wave of hearing and balance issues for which our aging population will require solutions. The public health cost of untreated balance disorders in the elderly resulting in falls and the associated comorbidities continues to rise. The interface between central auditory function and cochlear dysfunction is increasingly recognized as an important factor in cognitive decline. We continue to educate policymakers on the importance of hearing and balance healthcare and the critical nature of public health consequences of these disorders.

The daily practice of otology and neurotology is also being revolutionized by new technologies. Endoscopic ear surgery is changing the way we access the middle ear and teach ear surgery. Eustachian tube balloon dilation has given us a new tool to address the common underlying problem of so much middle ear disease. Miniaturization of robotic technology may allow less invasive approaches to the ear and lateral skull base. Progress is being made in implants that will restore vestibular function. Meanwhile, advances in wearable consumer audio devices have blurred the lines that define conventional hearing aids, so much so that Congress has mandated that the FDA issue regulations for over-the-counter hearing devices. This promises to disrupt

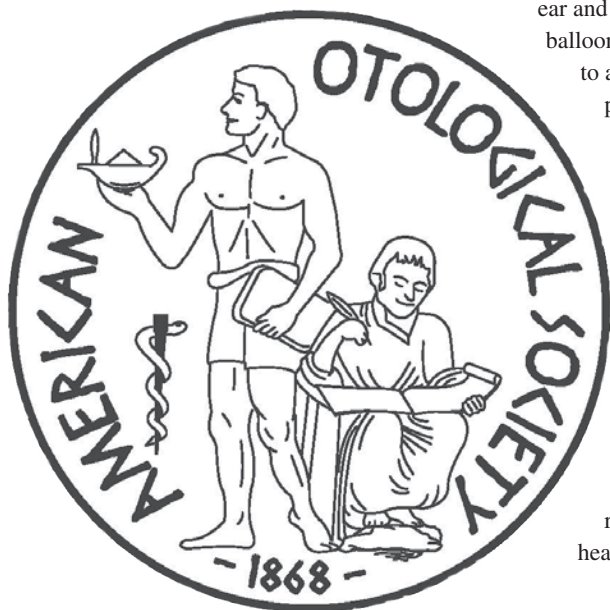
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Tremendous advances have been made possible by chips that assay for hundreds or thousands of genes or proteins and by parallel advances in big data analytics that link molecules into networks.

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the market for hearing aids but to expand access for our aging populace.

Disruptive technologies and an aging population will challenge our subspecialty, but we are encouraged by an increasingly diverse and flexible workforce to meet these demands. According to a recent survey by Women in Neurotology, while 17 percent of the American Neurotology Society overall are women, the youngest generation is nearly one-third women surgeons. There is growing recognition that more needs to be done to advance women and minorities to leadership positions in our organizations and institutions. Leaders of our subspecialties are committed to diversity and inclusion strategies to ensure that our future challenges will be met by the full range of talent that we have to offer. ■



Presidential Citations 2019

The Presidential Citations are given to individuals who have had a profound influence on the AAO-HNS/F President's life and otolaryngology. President **Albert L. Merati, MD**, has selected these individuals for their outstanding contributions.

Register by August 6 to save!

Take advantage now of the lowest price currently offered on registration. Visit www.entannualmeeting.org for additional information and pricing.

Robert H. Ossoff, DMD, MD

Former Guy M. Maness Professor of Laryngology and Voice at Vanderbilt University Medical Center

My life changed when

I had my first conversation with Dr. Ossoff. This took place in the small break room at the Vanderbilt Voice Center during my fellowship interview in 1995. The lunch meeting was scheduled for 30 minutes but went for over an hour. "I view myself as an educator," he told me as he laid out his long-term vision for moving laryngology forward as a recognized subspecialty within otolaryngology. Dr. Ossoff has a professional intensity I truly admire. I never saw him do anything but the right thing for the patient. He was careful, methodical, and at all times a total professional – truly a model clinician.

Dr. Ossoff provided something very valuable to me in my early career: While acknowledging my excellent training at UCSD, he described his fellowship as a sort of finishing school, honing my clinical thinking and helping mature me as a professional. As a mentor and advisor, he is second to none in our field; each and every major professional decision I have faced has been informed by a conversation with Dr. Ossoff. When I was asked to consider running for this office of President of our AAO-HNS/F, I spoke to two people: JPM (Jenny, my wife) and Dr. Ossoff. I learned the word *naches* from him—that magical Yiddish word for the feeling of gratification and pride in the accomplishments of others. As I mature into more mentorship roles, I have begun to better understand the power of *naches* in the way that he described it to me all these years. ■



Mustafa Gerek, MD

Department of Otolaryngology-Head and Neck Surgery, Gülhane Military Medical Academy, Ankara, Turkey

Dr. Gerek is, for all practical

purposes, the brother I never had. A native of Adana, Dr. Gerek literally rose through the ranks of military medicine (he is a Brigadier General in the Turkish Air Force) to lead the Gülhane Military Medical Academy Otolaryngology Department, one of the flagship institutions in Turkish Medicine. He now also serves as the Vice President of the University of the Health Sciences there. As many of you know, the tradition in otolaryngology in Turkey is strong and growing stronger with leaders like Dr. Gerek and many others representing our AAO-HNSF's guest countries for the 2019 Annual Meeting.

Mustafa and I met in 1997 in Nashville, TN, when we were fellows together at the world-famous Vanderbilt Voice Center. Given my heritage (my parents immigrated to the U.S. from the northernmost part of Iran where Azeri, a dialect of Turkish, is the native language), we bonded immediately. Who knew we would have this remarkable journey together?

To me, Dr. Gerek embodies the builder—a visionary who leads by example with high standards and force of personality. Mustafa and his wife, Şehnaz, a judge on one of the country's highest courts, are a remarkable team (along with their two awesome children). We look forward to the next generation of international connections as our professional and personal reach gets broader and our world gets smaller. ■



Tanya K. Meyer, MD

Surgeon at the University of Washington Head and Neck Surgery Center and a University of Washington Associate Professor of Head and Neck Surgery

Dr. Meyer is my longtime friend and partner here at the University of Washington. She is a senior laryngologist with a national



reputation in clinical neurolaryngology as well as for her research on the impact of voice disorders in the workplace. Her local reputation is due to this but also for being our respected and highly successful Residency Program Director here at UW. Dr. Meyer has a blend of kindness and ferocity that I admire greatly. Furthermore, while I struggle with my self-importance and ego, she has no such demons.

Dr. Meyer embodies so much of the positive that I see in the otolaryngology world around me; she herself is a bit of a throwback uniform from sepia-toned days of otolaryngology but also has a very real grasp of contemporary issues facing our trainees today. Her beloved parents were both surgeons; her father worked for years as an orthopedic surgeon in North Carolina, and her now departed mother was a true pioneer—a Korean-American woman trained in otolaryngology here in the United States in the 1970s. While many of you reading this have fathers (and even children) who are otolaryngologists, I know of no other example of a leader in otolaryngology whose mother was an otolaryngologist. That will certainly change in time! Dr. Meyer is a special person in my life, and I choose to honor her as one of my Presidential Citation awardees. I absolutely could not have done this without her and the support of our team at the University of Washington Department of Otolaryngology – Head and Neck Surgery. ■

Michael M. Johns III, MD

Director, USC Voice Center at Keck Medicine of USC and Professor of Clinical Otolaryngology – Head and Neck Surgery and Division Director of Laryngology at the Tina and Rick Caruso Department of Otolaryngology – Head and Neck Surgery.



Mike Johns III is Professor of Clinical

Otolaryngology-Head and Neck Surgery at the University of Southern California Keck School of Medicine and is Director of the USC Voice Clinic. I talk to Mike Johns at least three times a week, usually while I am walking around Green Lake here in Seattle, WA. We cover life, politics (of otolaryngology), careers, and gossip. I chose Mike as one of my Presidential Citation awardees to recognize him and the circle of professional friends and advisors he represents. He has encouraged me when I wasn't sure of things, flicked me in the forehead (figuratively) when I was off base, shared alternative perspectives, and argued with me to help hone a plan or show me the errors of my thinking. Dr. Johns brings a blend of candor, energy, trust, and raw smarts that I find very compelling in a friend and partner. I am truly grateful for his advice and friendship. ■

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The most up-to-date, real-time Annual Meeting schedule is now available on the #OTOMTG19 mobile app. Search "OTO 2019" in the Apple or Google Play stores to download.



Career development

You already know the 2019 Annual Meeting & OTO Experience is where experts and science converge, but did you also know that the Annual Meeting provides a pathway to navigate your career? Visit the exhibit hall and you'll find the ENT Careers booth, where you can meet face-to-face with hiring representatives. Plan to attend the Career Fair on Monday evening for yet another opportunity for job seekers across all otolaryngology subspecialty areas and levels of training to meet with dozens of recruiters while enjoying a reception. Be sure to take advantage of these trusted otolaryngology employment resources.

For medical students and young physicians, we are debuting a Young Physician Pavilion in the OTO Experience, Sunday through Tuesday of the conference. These groups will gather with program directors and department chairs in an informal setting to network while discussing the best approaches to navigate their careers in otolaryngology. ■

Experts to present groundbreaking science at #OTOMTG19

Experts and science converge at the AAO-HNSF Annual Meeting & OTO Experience, September 15-18, in New Orleans, LA. This year's education program features a world-renowned faculty discussing state-of-the-art treatment modalities, new therapies, and ongoing controversies in the field.

While you're connecting with experts in the specialty, here's how to also absorb the latest clinical approaches, best practices, and groundbreaking discoveries.

Build your #OTOMTG19 schedule.

With four packed days, 10 groundbreaking program formats, and more than 400 continuing education sessions to choose from, now is the time to start planning. Download the app for your Apple or Google mobile device to start building your schedule.

Sign up for a preconference workshop.

Start strong in New Orleans with an in-depth workshop led by top medical minds featuring topics such as sialendoscopy and salivary duct surgery, endoscopic ear surgery and eustachian tube balloon dilation, thyroid, parathyroid, and neck ultrasound, and OTO emergencies: "Worst Case Scenarios Managing OTO Emergencies in Practice." Space is limited, so reserve your seat today!

Concentrate on your subspecialty or expand your knowledge in other areas.

The education program is divided into the following 11 distinct tracks, allowing you to focus within your subspecialty or expand your knowledge in other areas:

- Business of Medicine/Practice Management
- Endocrine Surgery
- Facial Plastic and Reconstructive Surgery
- General Otolaryngology
- Head and Neck Surgery
- Laryngology/Broncho-Esophagology



Medical minds from around the globe and all subspecialties will connect in one location for cutting edge education at **#OTOMTG19**. Register today and start planning your Annual Meeting experience at www.entannualmeeting.org.

- Otolology/Neurotology
- Patient Safety and Quality Improvement
- Pediatric Otolaryngology
- Rhinology/Allergy
- Sleep Medicine

Check out the late-breaking abstract presentations.

New this year, the AAO-HNSF Annual Meeting Program Committee accepted late-breaking abstract submissions to introduce the most recent, up-to-date medical findings. Late-Breaking Scientific Oral Presentations will showcase research that is novel, innovative, contemporary, and of high scientific significance.

See the latest in simulation.

#OTOMTG19 features several simulation events. The Tulane Center for Advanced

Medical Simulation and Team Training will host a "Worst Case Scenarios Managing OTO Emergencies in Practice" workshop. The 4.5-hour course is geared toward practicing otolaryngologists to prepare them for low frequency, high stakes emergency situations. Attendees will participate in a rotation of six simulated otolaryngology emergencies. Space is limited, so make sure you reserve your seat. See the top three most innovative simulation project authors present to a panel of expert judges while competing for the top prize during the SIM Tank. The Simulation Reception showcases innovative and novel otolaryngology simulators or simulation projects. Table-top simulator demonstrations and presentations will be on display highlighting individual and team accomplishments. ■

Why book in the AAO-HNSF Annual Meeting hotel block?

Answer: convenience, amenities, and free shuttle service*

Preparing for the 2019 Annual Meeting & OTO Experience, the American Academy of Otolaryngology–Head and Neck Surgery Foundation has secured hotel blocks at 24 properties within a mile radius of the Ernest N. Morial Convention Center in New Orleans, LA.

Staying at one of our contracted hotels is important to our organization, to the city of New Orleans, and ultimately to you as a valued AAO-HNS member. When you "book within the block," you help our association keep meeting costs as low as possible, thus enabling us to provide some of the important and valued features meeting attendees

have come to enjoy, such as the Welcome Ceremony, President's Reception, Guest Lectures, and networking events.

When you book a hotel room outside of the block and a contracted room goes unsold, AAO-HNSF pays penalty fees to the hotel. In addition, the inability to prove the actual number of hotel rooms occupied weakens our negotiating power in the future. Destination Marketing Organization (DMO) or a Convention and Visitors Bureau (CVB) are funded based upon their ability to fulfill the room night goals that have been contracted; a reduction in funding means fewer goods and services, and it is those offerings to attendees that make our meeting a success. ■

Hotel reservations will be available May 6 - September 7, 2019.

To book your room, please go to www.entannuameeting.org, call us at 1-866-212-0683 (toll-free U.S. & Canada) or 1-972-349-5970 (international), or email registrationhousing@entnet.org.

HOT TOPICS AT #OTOMTG19

- Contemporary Diagnosis and Treatment of Dysphagia
- Medical Work-Up of Pediatric Sensorineural Hearing Loss
- Managing Vascular Malformations: Laser and Surgical Therapy
- The Transgender Voice: Treatment and Surgical Techniques
- Trigeminal and Facial Reanimation: The State of the Art
- Turning Back the Clock: Optimizing Treatment of Age-Related Voice Changes
- Advanced Cochlear Implantation: Obstructed and Malformed
- Endoscopic Management of the Pediatric Airway with Simulation Models
- Larynx Cancer: Updates for the General Otolaryngologist
- Surgery of the UES: When, How, and Which Technique Should I Use

**A \$125 fee will be charged per reservation for shuttle bus access for rooms booked using an unofficial provider. For those booking in the AAO-HNSF hotel block, shuttle bus transportation is included unless the hotel is within walking distance.*

WARNING: Booking hotel reservations through unofficial or unauthorized websites or third-party housing providers may put your identity at risk. Please make your reservation via the official conference reservation system, www.entannuameeting.org.

Cancellation Policy: Hotel cancellations must be received in writing to the AAO-HNSF by 5:00 pm (CT), September 6, 2019. Cancellations received by this date will receive a full refund of the hotel deposit by AAO-HNSF. Please allow 60 days for refund processing. Failure to check in to your hotel on the confirmed date of arrival will result in forfeiture of the entire room deposit. After September 6, 2019, any changes to the hotel must be made directly with the hotel. Cancellation may be submitted to registrationhousing@entnet.org.



INTERNATIONAL GUEST OF HONOR 2019: PERU

The hearing disability status in Peru

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As President of the AAO-HNS/F, it is my great honor to welcome the delegation from the Peruvian Society of Otolaryngology and Facial Surgery to our Annual Meeting in New Orleans. We look forward to our societies working together for the care of patients worldwide through collaboration and friendship now in New Orleans and into the future.

— **Albert L. Merati, MD**
President, AAO-HNS/F

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■ **Manuel A. Gallardo-Flores, MD**, President,
Peruvian Society of Otolaryngology and Facial
Surgery

Hearing impairment is the alteration in the quality and living conditions of a person by a hearing loss greater than 40 decibels (dB) in the best ear. It is estimated that more than five percent of the world's population has disabling hearing loss.

In Peru, the first specialized survey on disability was held in the year 2012. It showed that 1.8 percent of the population (532,209 people) had permanent hearing limitation. The survey also estimated that in 2015 there would be 560,730 people with hearing loss.

The National Council for the Integration of the Disabled Person (CONADIS) is an institution that aims to guarantee the recognition and protection of the rights of people with disabilities in Peru.

There are 22,674 persons registered in the National Registry of the Person with Disabilities, 14.4 percent of whom have

hearing loss. Of these, 43 percent are women and 57 percent men. Children and adolescents comprise 21.7 percent, with young people 18-29 years making up 22.3 percent, 30-44 years making up 19.3 percent, and older adults making up 20.9 percent.

Among the causes of hearing loss are advanced age (60.8 percent), genetic/congenital conditions (11.1 percent), and chronic disease (6.2 percent).

In a survey conducted by the National Institute of Statistics and Informatics (INEI), 49.6 percent had mild hearing loss, 26.2 percent moderate, 17.7 percent severe, and 4.4 percent deep.

In terms of education access, 6,534 students with deep hearing loss are treated in the education system. There were 2,203 students from the first grades of education who attend inclusive schools. In the university, there were 1,218 students with hearing loss.

The estimated population for Peru in the year 2025 is 34.4 million, with a life expectancy of 76 years. The population in the

main cities is distributed mostly on the coast at 51.9 percent, with the Sierra at 26.6 percent and the jungle at 21.5 percent. Peru is a multicultural country with large geographical, linguistic, and cultural barriers. The highest percentages of hearing loss is in the south of the country (2.2-2.7 percent), in the country's capital, Lima, with 2 percent, and on the coast and in the jungle with 0.6-1.4 percent.

In December 2013, a law of national interest declared the creation of the Universal Neonatal Screening Programme (Supreme Decree No. 014-2013-SA), which was adopted with the aim of providing timely treatment and promoting comprehensive healthcare from the neonatal stage in order to reduce morbidity, disability, and infant mortality. This law is not properly regulated.

In 2018, there were 654 otolaryngologists, with 49.4 percent of those located in Lima and Callao. This generates an unequal distribution of specialists in the country, even more so considering that the highest percentages of hearing loss is found in provinces, especially in the south. To this we must add that the national hospitals are poorly implemented and have scarce resources, especially in the interior of Peru. Auditory screening is performed in national health institutions, social security and military hospitals, and private clinics. Not all of them have the necessary equipment for this procedure.

Efforts are made, especially in social security hospitals, to place cochlear implants and deliver hearing aids, but there are still many patients who need them. We are on our way to attending to most of the patients with hearing loss, but first we must know the real impact of this problem. ■

Bibliography

1. INEI. First Specialized National Survey on Disability 2012. File 2014.
2. CONADIS. International Week of the Hearing imPaired Person. National Observatory on Disability. Lima September 2016.



OUT OF COMMITTEE: OREBM

Upper Airway Stimulation to treat Adult Obstructive Sleep Apnea

■ **Neerav Goyal, MD, MPH, Derek J. Lam, MD, MPH,** and **Vikas Mehta, MD, MPH,** for the AAO-HNSF Outcomes Research and Evidence-Based Medicine (OREBM) Committee

In this *Bulletin* segment, the American Academy of Otolaryngology–Head and Neck Surgery Foundation (AAO-HNSF) Outcomes Research and Evidence-Based Medicine (OREBM) Committee shares highlights from a 2017 study, “Upper Airway Stimulation for Obstructive Sleep Apnea: Patient-Reported Outcomes after 48 Months of Follow-up.”¹ The focus of this ongoing series is to highlight articles that may alter surgical practice, and to discuss the strengths and limitations of these publications.

Obstructive sleep apnea (OSA) is a condition affecting a significant portion of the adult and pediatric population, with OSA being a primary indication for tonsillectomy and adenoidectomy in children. Among adults, OSA is notably associated with hypertension, diabetes, asthma, heart disease, stroke, workplace and motor vehicle accidents, increased mortality and a decreased quality of life (QOL). The overall economic cost of untreated OSA as published in a 2015 commissioned report by the American Academy of Sleep Medicine (AASM) measured \$149.6 billion². Recent estimates suggest 13 percent of men and six

percent of women in the U.S. have moderate to severe OSA, with the large majority being undiagnosed³.

While surgery is the primary modality for treating OSA in children, continuous airway positive pressure (CPAP) remains the standard treatment for adults. Though CPAP is an effective treatment modality, long-term compliance with therapy remains low^{2,4,5}. Adult sleep surgery has long been in the armamentarium of the otolaryngologist, with variable efficacy and long-term success with traditional techniques. More recently, research into hypoglossal nerve stimulation has led to the development and approval by the FDA (in 2014) of an upper airway stimulator (UAS). The stimulator device includes a stimulator cuff placed on the distal hypoglossal nerve, a pulse generator placed within a subcutaneous pocket in the chest, and an intercostal respiratory-sensing lead.

This longitudinal observational study investigated 48-month long-term results from patients implanted with a UAS as part of the phase III multi-center Stimulation Therapy for Apnea Reduction (STAR) trial that led to FDA approval of this device. Patients included in the trial were those with moderate to severe OSA and intolerance or non-compliance with CPAP. Exclusion criteria included BMI > 32, neuromuscular disease, cardiopulmonary disorders, active psychiatric disease, comorbid non-respiratory sleep

disorders, an apnea/hypopnea index (AHI) <20 or >50, central or mixed apneas >25 percent of the AHI, non-supine AHI < 10, anatomic abnormalities that would prevent effective use of the device (e.g., tonsillar hypertrophy), or complete concentric collapse at the level of the velum on drug-induced sleep endoscopy.

A total of 126 patients were included and underwent UAS implantation. Prior reported results demonstrated a reduction in 12-month AHI from a median of 29.3 to 9.0 at one year post implantation⁶. This study reviewed secondary outcomes at 48 months, including subjective sleepiness and QOL related to sleep using the Epworth Sleepiness Scale (ESS) and Functional Outcomes of Sleep Questionnaire (FOSQ). The authors also evaluated continued patient-reported compliance with therapy and snoring intensity. At 48 months, 91 patients remained in the study with complete data, and four patients with incomplete data.

Analysis of the above QOL outcomes demonstrated a median FOSQ score of 18.6, which was significantly improved from baseline. However, the average score (17.5) was still below fully normal values (>17.9). The ESS median score was six with an average significantly improved from baseline and within the range of normal. Both outcome measures were notably consistent over time since intervention. Additional

outcomes measured included 91 percent of subjects and 85 percent of bed partners reporting none or only soft snoring at 48 months compared to 22 percent and 17 percent at baseline, respectively. Less than one percent of bed partners left the room at night as compared to 30 percent at baseline. Seventy-five (81 percent) of the subjects reported continued nightly use of the device at 48 months, in contrast to <40 percent reporting > six months CPAP compliance in a separate prospective trial of more than 1,000 patients⁷. The study noted no difference in demographic characteristics between the patients actively in the study as compared to those without long-term follow up.

Over the study period, five serious adverse events were reported (four percent) with three patients undergoing elective explanation and two requiring revision surgeries to replace malfunctioning device components. Minor adverse events such as discomfort related to tongue stimulation, tongue abrasion, and incisional discomfort decreased over the follow-up period.

Findings and Recommendations:

Prior results from the STAR trial cohort have demonstrated UAS to be effective in treating OSA and reducing AHI in this selective CPAP non-compliant population at 36 months. The investigators demonstrate that adherence to UAS therapy is stable over the four-year follow-up period with minimal complications and consistent, significant improvement in functional and quality-related sleep outcomes. The authors also note that while the median FOSQ score was improved over baseline, patients within this cohort had persistent sub-normal scores. They also highlight that some patients require multiple modalities of therapy, specifically mentioning one patient who augmented UAS therapy with an oral appliance to further reduce the AHI and thus emphasizing the challenge of treating this chronic disorder. The study is limited by the loss of follow-up for more than 25 percent of the original cohort. Additionally, the generalizability of the study to larger OSA population is limited

secondary to highly specific inclusion/exclusion criteria in selecting candidates eligible for implant. Overall, these data support the use of UAS in treating OSA in select patients and demonstrate consistent, long-term improvement of objective and subjective outcomes. An important next step will be to follow the efficacy and results of UAS going forward as the inclusion criteria continue to expand. ■

Bibliography

1. Gillespie MB, Soose RJ, Woodson BT, et al. Upper Airway Stimulation for Obstructive Sleep Apnea: Patient-Reported Outcomes after 48 Months of Follow-up. *Otolaryngol Neck Surg.* 2017;156(4):765-771. doi:10.1177/0194599817691491
2. Frost & Sullivan. Hidden Health Crisis Costing America Billions. Underdiagnosing and Undertreating Obstructive Sleep Apnea Draining Healthcare System. American Academy of Sleep Medicine; 2016. <http://www.aasmnet.org/sleep-apnea-economic-impact.aspx>. Accessed April 5, 2019.
3. Peppard PE, Young T, Barnett JH, Palta M, Hagen EW, Hla KM. Increased Prevalence of Sleep-Disordered Breathing in Adults. *Am J Epidemiol.* 2013;177(9):1006-1014. doi:10.1093/aje/kws342
4. Kribbs NB, Pack AI, Kline LR, et al. Objective measurement of patterns of nasal CPAP use by patients with obstructive sleep apnea. *Am Rev Respir Dis.* 1993;147(4):887-895. doi:10.1164/jrccm/147.4.887

OREBM and PSQI presenting at #OTOMTG19

OREBM

OREBM members developed the following seven Panel Presentations that were accepted for the AAO-HNSF 2019 Annual Meeting & OTO Experience program in New Orleans, LA:

- Are You Up-To-Date: Otolaryngology Systematic Reviews Pt. I & Pt. 2
- Controversies in Parotid Surgery: Is There Evidence? Pt. I & Pt. 2
- Intraoperative Nerve Monitoring in Head and Neck Surgery: State of the Art
- Kids Today: Rapid Review of Guidelines and Consensus Statements
- Opioid-Sparing Strategies in Otolaryngology: Approaches to Eliminate Opioids
- Recent Publications That Could Change Your Practice: Pediatric and General Otolaryngology
- Using Big Data in Otolaryngology

➔ READ MORE ONLINE

PSQI

PSQI members developed the following eight Panel Presentations that were accepted at the AAO-HNSF 2019 Annual Meeting & OTO Experience program in New Orleans, LA:

- An Ounce of Prevention is Worth a Pound of Cure: Improving OR Safety and Quality
- A Primer for Assessing your Clinical Practice Using Quality Improvement
- Are We Choosing Wisely in OHNS? Perspectives on Value, Variation, and Impact
- Opioid-Sparing Strategies in Otolaryngology: Approaches to Eliminate Opioids
- Enhanced Recovery After Surgery: Optimizing Perioperative Patient Care
- Office/OR Equipment Disinfection & Storage: Sound Evidence or Alternative Facts?
- Measure of a Surgeon: Perspectives on Evaluating Surgical Competency
- Near Misses, Near Events, and Just Plain Scary Cases

➔ READ MORE ONLINE



RESEARCH & QUALITY

Quality resources for your patients and practice

The Research and Quality Business Unit works to remain at the forefront of all aspects of a data-driven environment. Our daily work involves being comfortable operating within numerous highly technical areas: data analytics, decision support, clinical data registry development and operations, and clinical practice guideline and quality measure development. Increasingly this means retaining staff who have educational and professional expertise

in healthcare analytics as well as the ability to understand and work with technology in a fast-paced environment.

In three short years, the Reg-entSM clinical data registry has close to seven million unique patients and over 12 million patient visits. The registry analyzes millions of data points from these patients and visits and compiles the data into straightforward reports detailing benchmarks at the local and national level. The dedication of our members and their practice administrators

has been incredible, and we could not have reached this milestone without their continued contributions and support.

Now we are building capabilities for research that will harness this data, ensuring it leads us toward better practices and patient outcomes in otolaryngology-head and neck care. Participating in Reg-ent will assist our members in supporting clinical investigation and pre- and post-market surveillance of devices and drugs, as well as ease the process for participating in clinical trials. For our

United States-based members, Reg-ent has provided a straightforward way to report all aspects of the Merit-based Incentive Payment System (MIPS).

For close to 12 years, we have been working with our volunteer physicians on providing clinical guidance through clinical practice guidelines (CPG) and clinical consensus statements (CCS), and we are recognized by outside experts as having best practice in our development of these products. CPGs have formed the evidence base for our specialty-specific quality measures that now populate Reg-ent and are used for government (MIPS) reporting. The contribution from the Reg-ent Executive Committee (REC) and the seven Clinical Advisory Committees (CACs) to otolaryngology measurement science cannot be overstated. Staff consistently utilize the

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A decade ago, the Research and Practice Management Model was developed to demonstrate a future vision for Research and Quality, and it is amazing how relevant this graphic remains today...

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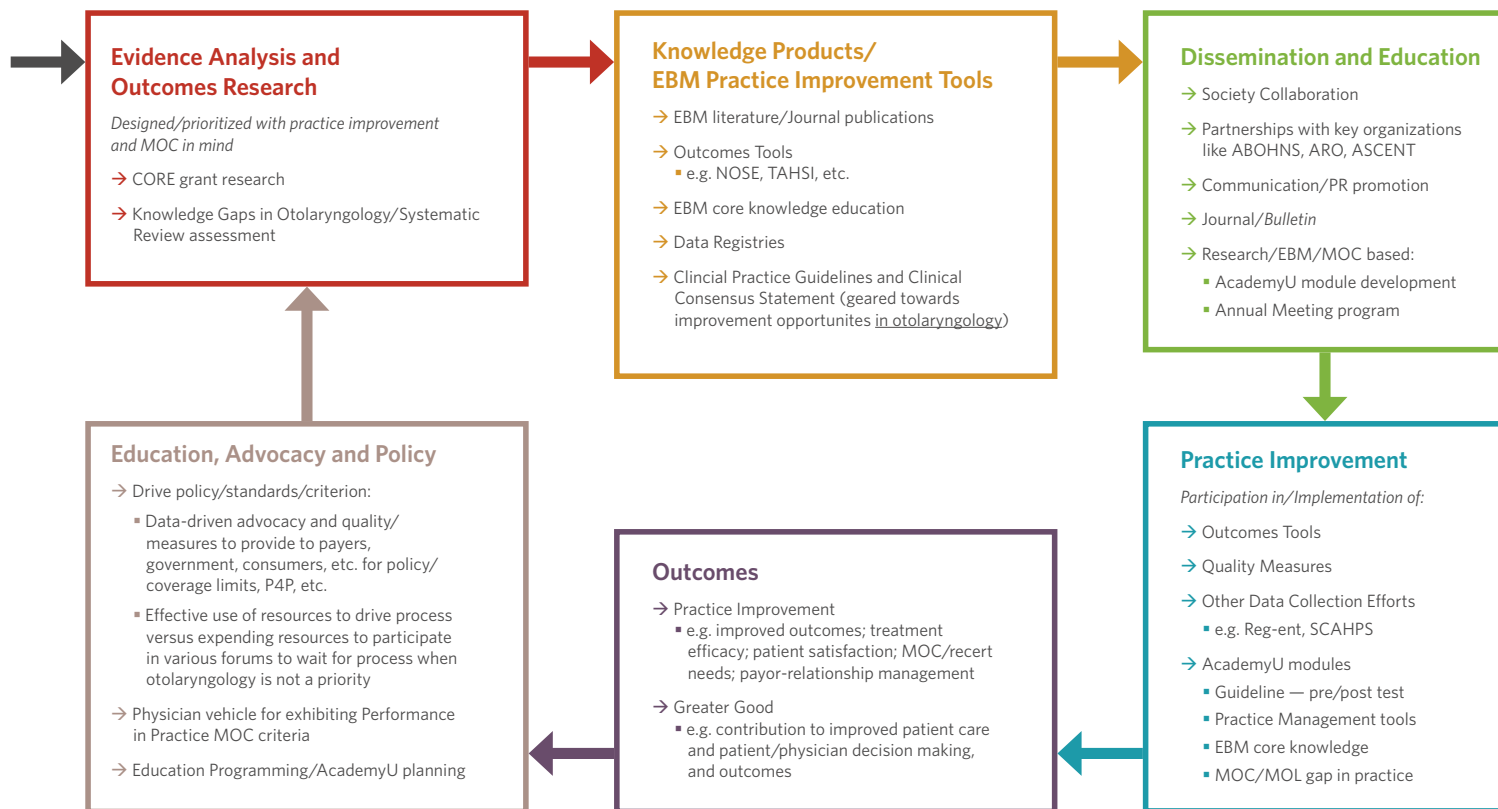
CAC’s clinical expertise to develop measures that are meaningful to our members.

This year, the Centralized Otolaryngology Research Efforts (CORE) grants has surpassed \$556,562 of funding within the specialty.

A decade ago the Research and Practice

Improvement Model was developed to demonstrate a future vision for Research and Quality, and it is amazing how relevant this graphic remains today as we continue to adhere to many of the aspects of this model in moving forward with research and quality priorities. ■

RESEARCH AND PRACTICE IMPROVEMENT MODEL



Clinical Consensus Statement: Balloon Dilation of the Eustachian Tube

Our Guidelines Task Force, chaired by **David E. Tunkel, MD**, continues to produce timely, critical, evidence-based publications essential to defining and improving quality in otolaryngology care. **Debara L. Tucci, MD, MS, MBA**, chaired the panel that produced the most recent Clinical Consensus Statement: Balloon Dilation of the Eustachian Tube (BDET), published online in *Otolaryngology–Head and Neck Surgery* in June. This document will contribute significantly to an orderly adoption of this new technology and help facilitate research into additional applications much in the way that the prior Clinical Consensus Statement: Balloon Dilation of the Sinuses, published in February 2018, functioned to further integrate those procedures into our treatment armamentarium.

The panel was able to reach consensus on 28 statements after three iterative Delphi method surveys related to patient criteria, perioperative considerations, and outcomes. An additional 28 statements failed to achieve consensus. Areas where knowledge gaps exist identified opportunities for future research. In the meantime, this information should prove helpful for otolaryngologists considering the use of BDET for the management of patients with obstructive eustachian tube dysfunction. Congratulations to Dr. Tucci and the panel for their exemplary work on this important subject. ■

To read the Clinical Consensus Statement: Balloon Dilation of the Eustachian Tube, go to <https://journals.sagepub.com/doi/full/10.1177/0194599819848423z>

G-I-N and Cochrane Scholars Spotlight

The AAO-HNSF is committed to developing and disseminating evidence-based clinical practice guidelines (CPGs) and has partnered with the Guidelines International Network (G-I-N) and the Cochrane Collaboration to further this goal.

The **Guidelines International Network (G-I-N)** is an international not-for-profit association of organizations and individuals involved in CPGs. G-I-N promotes the systematic development of CPGs and provides access to an international guideline library. The G-I-N Scholars program provides grants for members to attend the G-I-N conference. Requirements for grant recipients include commitments to collaborate with the AAO-HNSF as a panel member or assistant chair of an upcoming guideline panel and to submit a commentary pertaining to CPGs to *Otolaryngology–Head and Neck Surgery*.

"I was a fortunate recipient of the G-I-N North America (EGAPPSII) Scholar award in 2017. This experience introduced me to the foundations and principles of the guideline development process. With this background, I have served as Assistant-Chair for



the Nosebleed (Epistaxis) Clinical Practice Guideline. It was an incredible experience to be involved in the development process because

it is simply efficient, methodical, and systematic. The involvement of multiple experts, different specialists, and consumer advocates allows for expression of numerous vantage points while simultaneously making the guideline articulate and comprehensive. In other words, it is a 'well-oiled machine.'"

– **Samantha Anne, MD**
2017 G-I-N Scholar

The **Cochrane Collaboration** is an international network that works together to gather and summarize the best evidence from research to help people make informed choices about healthcare treatment. They do this by preparing, updating, and promoting accessibility of high-quality systematic reviews, which become part of the Cochrane library. The Cochrane Scholars Program, supported by SAGE, publisher of *Otolaryngology–Head and Neck Surgery* and *OTO Open*, provides travel grants to attend the Cochrane Colloquium. Grant recipients must agree to initiate and submit a systemic review to *Otolaryngology–Head and Neck Surgery*. Many Cochrane scholars have gone on to serve on AAO-HNSF CPG panels.

"Evidence-based medicine is valuable for every otolaryngologist. Accurate and meaningful evidence can improve our effectiveness and safety. Gaining



a deeper understanding of the science behind evidence-based medicine has been career-enriching for me. It was an immense honor

to participate in recent international Cochrane courses, which provided enlightening didactic content regarding systematic reviews and meta-analyses along with new collaborative relationships. These opportunities have allowed me to serve our field through systematic review publication and clinical practice guideline development. I've found that practical knowledge and experience in evidence-based medicine research and initiatives has made me a better clinician, researcher, and teacher."

– **Matthew L. Bush, MD, PhD**
2017 Cochrane Scholar

RESEARCH SUPPORTS ADVOCACY

AAO-HNSF Consensus Statements and Guidelines support payment efforts

While Clinical Practice Guidelines (CPGs) are based on high-quality evidence, Clinical Consensus Statements (CCSs) reflect the views of an expert panel that has examined the scientific data available and experienced the procedure through research and/or clinical practice.

Recently published AAO-HNSF CCSs have been used by the AAO-HNS Health Policy Advocacy team to support coverage and coding of procedures commonly performed by Academy members.

CCSs that have been published or initiated include:

- CCS: Balloon Dilation of the Sinuses (February 2018)
- CCS: Balloon Dilation of the Eustachian Tube (June 2019)
- CCS: Ankyloglossia (in progress)

CPGs updated and published in 2019 include:

- CPG: Tonsillectomy in Children (Update) (February 2019)
- CPG: Sudden Hearing Loss (Update) (August 2019)

New products with anticipated publication include:

- CPG: Nosebleed (Epistaxis) (January 2020)
- CPG: Ménière's Disease (February 2020)
- CPG, Single Specialty: Opioid Prescription Following Otolaryngology Procedures

Our senior CPG methodologists, **Richard M. Rosenfeld, MD, MPH, MBA**, and **Seth R. Schwartz, MD, MPH**, have trained additional members to serve as guideline methodologists and continue to provide feedback to new "graduates" as they take the lead on guidelines. Our current methodologists now include **Stacey L. Ishman, MD, MPH**, and **David E. Tunkel, MD**.

CORE spotlights

Murugappan Ramanathan, Jr., MD

Director, National Capital Region, Johns Hopkins University Outpatient Center



"The CORE grants program has had a tremendous impact on my career as a surgeon-scientist.

As a second-year resident, I received my first CORE grant from the American Rhinologic Society (ARS). This early experience not only provided me funding to perform my research, but it taught me how to put together a NIH-style grant application. As a first-year faculty member, I received the American Academy of Otolaryngic Allergy (AAOA) Foundation Career Development award, which provided substantial funding to collect preliminary data and ultimately helped me receive an NIH K23 Career Development Award. Over the past eight years, I have been a reviewer for the CORE grants program. Critiquing and, more importantly, discussing grant proposals and networking with funded investigators definitely improved my 'grantsmanship.' Earlier this year, I was fortunate to receive my first NIH R01 grant. I feel that the overall experience in writing and reviewing grants for CORE was instrumental in helping me successfully prepare this larger grant application, forcing me to be more critical of myself every step of the way. The CORE grants program offers otolaryngologists a unique chance to receive funding for studies that otherwise may not be funded. There is no better resource for anyone seeking a career as an investigative otolaryngologist." ■

Lamont Jones, MD, MBA

Vice Chair, Henry Ford Hospital, Department of Otolaryngology HNS, Facial Plastic and Reconstructive Surgery; Clinical Associate Professor, Wayne State University School of Medicine



"I was the recipient of the 2015 American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) Research Scholar Award administered through the CORE grants program. I also have had the pleasure of serving as a CORE grant reviewer. In an era where many departments can't use money from clinical operations to support research, the CORE grant was invaluable to support the acquisition of vital preliminary data necessary to compete for more substantial funding. Moreover, participating in the CORE grants program, as an applicant and as a reviewer, gave me the experience to better understand the overall grant process. When I applied for the CORE grants award, I was at a point in my research career where I almost had what was necessary to competitively compete for NIH funding. However, I needed a grant that would demonstrate to my home institution that my project had merit and one that would provide bridging funds as I obtained the last critical components to successfully compete for NIH funding. The CORE grants award provided the needed support, and in 2018, I received a five-year \$900,000 K08 grant from the National Institute of General Medical Science. The CORE grants program provides practical experience and seed funding to prepare the next generation of otolaryngology physician scientists who will help solve the problems that our patients face now and in the future. Additionally, the program demonstrates to the world our profession's dedication and commitment to patient care and quality outcomes by investing resources to support research." ■

Centralized Otolaryngology Research Efforts (CORE) update

The Centralized Otolaryngology Research Efforts (CORE) grants program plays a critical role in advancing the field of otolaryngology by providing support to research projects, research training, and career development. CORE aims to:

1. unify the research application and review process for the specialty;
2. encourage young investigators to pursue research in otolaryngology;
3. serve as an interim step that may ultimately channel efforts for important National Institute of Health (NIH) funding opportunities.

The CORE grant program societies, foundations, sponsors, and partners have awarded more than 12 million dollars since the program's inception in 1985. The American Academy of Otolaryngology–Head

and Neck Surgery Foundation (AAO-HNSF) administers the CORE grants program for participating societies and sponsors.

In 2019, the AAO-HNSF, the American Head & Neck Society (AHNS), the Association for Migraine Disorders (AMD), the American Rhinologic Society (ARS), the American Society of Pediatric Otolaryngology (ASPO), the Education and Research Foundation for the American Academy of Facial Plastics and Reconstructive Surgery (AAFPRS), and Xoran Technologies, LLC, were involved in funding grants ranging from \$5,000 to \$80,000. The CORE grant program provides recommendations for funding to the partner societies, and the leadership of each participating subspecialty society is ultimately responsible for determining who is selected to receive funding each year. The recipients of the grants sponsored by Xoran

Technologies, LLC, are determined by the AAO-HNSF leadership.

This past March, the CORE Study Section of 61 volunteer members sponsored by all the partner societies met in Dallas, TX, to review 155 applications requesting \$2,338,053 in funding. Applications are classified into one of three CORE Study Section subcommittees, including: Head and Neck Surgery, chaired by **Cherie-Ann O. Nathan, MD**; Otolaryngology, chaired by **Oliver F. Adunka, MD**; and General Otolaryngology, chaired by **Michael J. Brenner, MD**.

The 2019 CORE leadership (including the boards and councils of all participating societies) has approved a portfolio of 35 grants totaling \$556,562. The AAO-HNSF-specific grants accounted for 19 grants approved and \$226,562 of total funding. ■

Congratulations to the 2019 core grantees!

AMERICAN ACADEMY OF OTOLARYNGOLOGY—HEAD AND NECK SURGERY FOUNDATION (AAO-HNSF)		
PI	INSTITUTION	PROJECT
AAO-HNSF Resident Research Grant sponsored by Xoran Technologies, LLC		
Conner Massey, MD	University of Colorado Denver, AMC and DC, Denver, CO	Using automated machine learning to volumetrically analyze sinus CT
AAO-HNSF Resident Research Grants		
Ruth Davis, MD	Johns Hopkins University School of Medicine, Baltimore, MD	Defining the role of PD1+ CD4 T-cells in laryngotracheal stenosis
William DeBusk, MD	Regents of the University of Minnesota, Minneapolis, MN	Implications of Electronic Cigarettes on Postoperative Wound Healing
Allen Feng, MD	Massachusetts Eye and Ear, Boston, MA	Biomechanical Analysis of Force Loadings During Suspension Microlaryngoscopy
Molly Heft Neal, MD	University of Michigan, Ann Arbor, MI	Molecular and Immune Biomarkers in Advanced Larynx Squamous Cell Carcinoma
Joshua Horton, MD	Medical University of South Carolina, Charleston, SC	The Central Memory Response to Neoadjuvant Immunotherapy in Oral Cancer
Emmanuel Jauregui, MD	University of Washington, Seattle, WA	Role of Sox2 in regulating murine vestibular hair cell fate during regeneration
William Kennedy, MD	University of Pennsylvania Health System, Philadelphia, PA	The Role of Biogenic Amines in the Pathogenesis of Chronic Rhinosinusitis
Ronit Malka, MD	The Geneva Foundation, Tacoma, WA	Quantitative Model of Decompression Surgery for Bell's Palsy
Eric Nisenbaum, MD, MSc	Miller School of Medicine of the University of Miami, Miami, FL	Tumor-Associated Macrophages and Hearing Loss in Vestibular Schwannoma
Anisha Noble, MD	University of Washington, Seattle, WA	Spectrotemporal Modulation Discrimination in Cochlear Implanted Children
Kaylee Purpura, MD	Eastern Virginia Medical School, Norfolk, VA	Surgical management of non-severe pediatric sleep apnea
Grace Wandell, MD	University of Washington, Seattle, WA	Validating a voice screening tool for laryngeal mass using machine learning
James Wang, MD, PhD	Cincinnati Children's Hospital Medical Center, Cincinnati, OH	Microbial Diversity and Biofilm Presence on Pediatric Airway Stents

AAO-HNSF Bobby R. Alford Endowed Research Grant		
Dunia Abdul-Aziz, MD	Massachusetts Eye and Ear, Boston, MA	Regulation of hair cell differentiation by histone demethylase Lsd1
AAO-HNSF Health Services Research Grant		
Eric Kezirian, MD, MPH	University of Southern California, Los Angeles, CA	Drug-Induced Sleep Endoscopy and Upper Airway Stimulation Outcomes
Leila Mady, MD, PhD, MPH	University of Pittsburgh, Pittsburgh, PA	The Cost of Cure: Financial Toxicity in Head and Neck Cancer Survivorship
AAO-HNSF Maureen Hannley Research Grant		
<i>No meritorious applications received.</i>		
AMERICAN HEAD AND NECK SOCIETY (AHNS)		
PI	INSTITUTION	PROJECT
AHNS Pilot Grant		
Hannah Knochenmann, BS	Medical University of South Carolina, Charleston, SC	Defining the role of CD26 in checkpoint blockade induced tumor immunity
Alok R. Khandelwal, PhD	Louisiana State University Health Sciences Center, Shreveport, LA	Targeting CXCL17/GPR35 axis in cutaneous squamous cell carcinoma
AHNS Alando J. Ballantyne Resident Research Pilot Grant		
Emily Marchiano, MD	University of Michigan, Ann Arbor, MI	Analysis of Novel Technologies to Assess Worst Pattern of Invasion
AHNS/AAO-HNSF Young Investigator Combined Award		
Marietta Tan, MD	Johns Hopkins University School of Medicine, Baltimore, MD	Intramuscular prime-intratumoral boost vaccination for HPV-positive cancer
AHNS/AAO-HNSF Translational Innovator Combined Award		
Vlad Sandulache, MD	Baylor College of Medicine, Houston, TX	Mitochondrial regulation of tumor immune microenvironment
AHNS Endocrine Section Eisai Research Award		
Sina Dadafarin, BS	New York Medical College, Valhalla, NY	Mechanisms of Androgen-Mediated PD-L1 Attenuation in Thyroid Cancer
Jennifer Wherley, MD	Oregon Health & Science University, Portland, OR	Thyroid tumor microenvironment in nodules with indeterminate FNA
AHNS Endocrine Section Stryker Research Award		
<i>No meritorious applications received.</i>		
AMERICAN RHINOLOGIC SOCIETY (ARS)		
PI	INSTITUTION	PROJECT
ARS New Investigator Award		
Waleed Abuzeid, MD	Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, NY	Nitric oxide release microparticles as a therapeutic strategy for CRS
ARS Resident Research Grant		
Jake Lee, MD	Washington University in St. Louis, St. Louis, MO	Intranasal Theophylline Irrigation for Post-Viral Olfactory Dysfunction
Sei Chung, MD	Medical College of Cornell University, New York, NY	Exercise capacity and septoplasty with inferior turbinate reduction
ARS Friends in Research Young Investigator Award		
Adam Kimple, MD, PhD	The University of North Carolina at Chapel Hill, Chapel Hill, NC	A novel thiol based mucolytic for treatment of sinus disease
Michael Kohanski, MD, PhD	University of Pennsylvania, Philadelphia, PA	Cytokine Profiling of Aspirin Exacerbated Respiratory Disease
AMERICAN SOCIETY OF PEDIATRIC OTOLARYNGOLOGY (ASPO)		
PI	INSTITUTION	PROJECT
ASPO Research Grant		
Douglas von Allmen, MD	Children's Hospital Medical Center, Cincinnati, OH	A Novel Method of Assessing the Abnormal Pediatric Airway with Ultrasound
Kaitlyn Zenner, MD	Seattle Children's Hospital, Seattle, WA	Mapping genetic heterogeneity in lymphatic malformations
Riccardo Gottardi, PhD	The Children's Hospital of Philadelphia, Philadelphia, PA	Posterior Cricoid Split Augmentation with Engineered Cartilage
ASPO Research Career Development Award		
<i>No meritorious applications received.</i>		
ASSOCIATION OF MIGRAINE DISORDERS (AMD)		
PI	INSTITUTION	PROJECT
AMD Resident Research Grant		
Eric Formeister, MD, MS	University of California, San Francisco, San Francisco, CA	Mindfulness-Based Stress Reduction for the Treatment of Vestibular Migraine
THE EDUCATIONAL AND RESEARCH FOUNDATION FOR THE AMERICAN ACADEMY OF FACIAL PLASTIC AND RECONSTRUCTIVE SURGERY (AAFPRS)		
PI	INSTITUTION	PROJECT
AAFPRS Leslie Bernstein Resident Research Grant		
Adeeb Derakhshan, MD	Massachusetts Eye and Ear, Boston, MA	The Effect of Electrical Stimulation on Schwann Cell States Along Nerve Grafts
AAFPRS Research Scholar Award		
Nathan Jowett, MD	Massachusetts Eye and Ear, Boston, MA	Facial EMG for neuroprosthetic device control in facial palsy.
AAFPRS Leslie Bernstein Grant		
<i>No meritorious applications received.</i>		
AAFPRS Leslie Bernstein Investigator Development Grant		
<i>No meritorious applications received.</i>		

2019 measures update

Quality measures are used to monitor patient care, connect clinical outcomes with healthcare processes, and meet third-party payer requirements. AAO-HNSF is committed to providing quality measures that meet our members' requirements for public reporting to both the Centers for Medicare & Medicaid Services (CMS) and private payers, as well as to track patient care over time.

Current AAO-HNSF measures

The AAO-HNSF led measures development projects for Age-Related Hearing Loss, Allergic Rhinitis, Cerumen Impaction, Bell's Palsy, Otitis Media with Effusion, Tympanostomy Tube Otorrhea, and Dysphonia. Manuscripts outlining the development process and including the measure specifications are in process and manuscripts are anticipated to be published in

early 2020. These measures can be viewed on the AAO-HNSF website using: www.entnet.org/2019-measures

Two sets of measures were developed with other societies. In partnership with the American Society of Plastic Surgery and American Academy of Facial Plastics and Reconstructive Surgery, rhinoplasty measures were developed, with a publication under development.

Neurotology measures developed in partnership with the American Academy of Neurology have been completed and published. An executive summary is available in the October 2018 issue of *Otolaryngology–Head and Neck Surgery*.

CMS approval of 2019 measures

For the 2019 Qualified Clinical Data Registry (QCDR) Reg-entSM application, 25 measures were submitted to CMS and 22 were approved for use in 2019 Merit-based Incentive Payment System (MIPS) reporting. Visit www.entnet.org/2019-measures for the full list of available 2019 Reg-ent measures, measure specifications, and newly developed flows for the QCDR measures. (See page 24 in this issue for an example of a measure flow). For questions regarding measures development, please contact: measures@entnet.org.

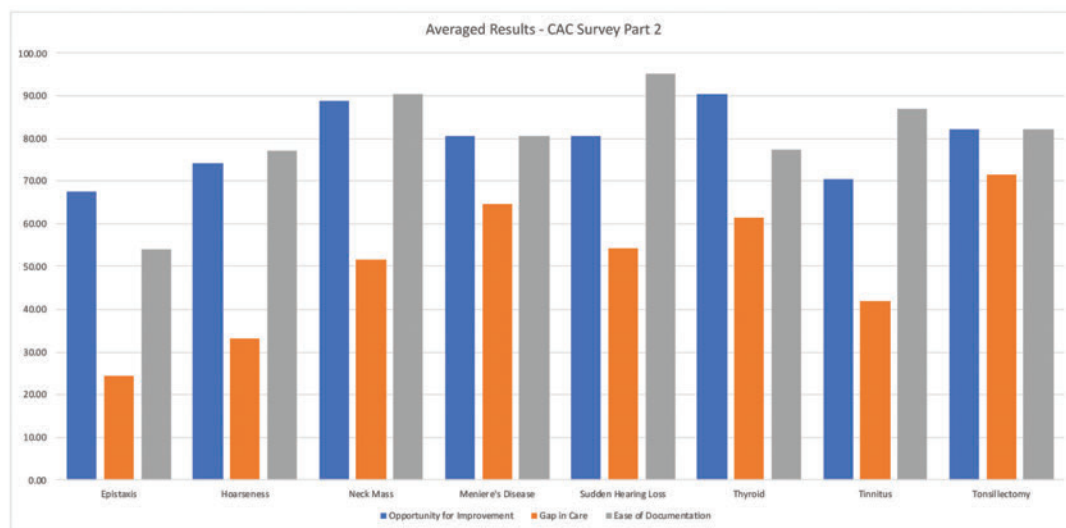
Measure prioritization

To address future measure development, a survey of the Clinical Advisory Committee (CAC) members was conducted in two parts. The first surveyed CAC members on clinical topics derived from clinical practice guidelines (CPGs) respective to each specialty. Data results were then evaluated for measurability by AAO-HNSF staff and **Richard M. Rosenfeld, MD, MPH, MBA**, Senior Advisor and Methodologist for Quality Measures and Guidelines. Measure statements were developed and CAC members were asked to score the statements on the following: opportunities to improve the quality of care, perceived gap in care, and ease of data capture in an electronic health record.

The CAC leadership, with each member also representing the Reg-ent Executive Committee, include: **James C. Denny III, MD**, Hearing and Balance; **William R. Blythe, MD**, Sinus and Allergy; **Lisa E. Ishii, MD, MHS**, Facial Plastics; **Carol M. Lewis, MD**, Head and Neck Surgery; **Melissa A. Pynnonen, MD**, Airway, Voice and Swallowing; **Jennifer J. Shin, MD, SM**, Pediatrics; **Lauren S. Zaretsky, MD**, General and Sleep; and **Richard M. Rosenfeld, MD, MPH, MBA**, Senior Advisor and Methodologist for Quality Measures and Guidelines. Each CAC Chair oversees eight to

10 specialist members. The entire CAC membership were invited to participate in the survey.

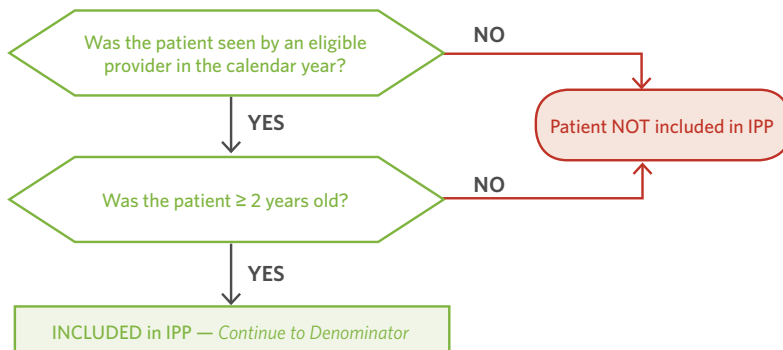
The information gathered from CAC members will inform measure needs and prioritization for the next measure development projects. (See table at left for survey results.) ■



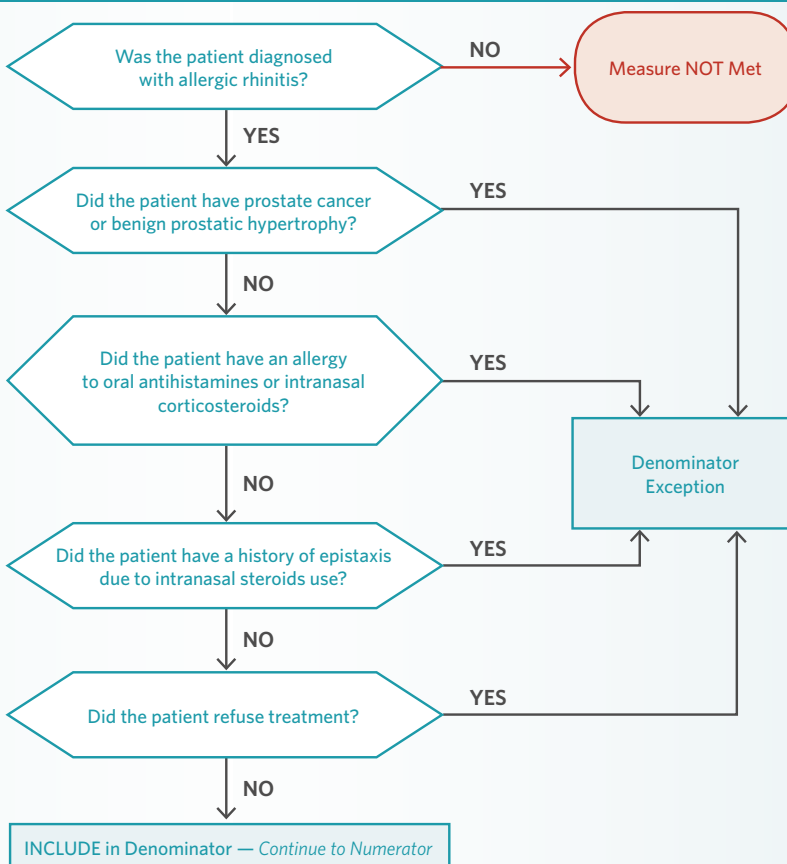
INITIAL PATIENT POPULATION (IPP)

MEASURE DESCRIPTION

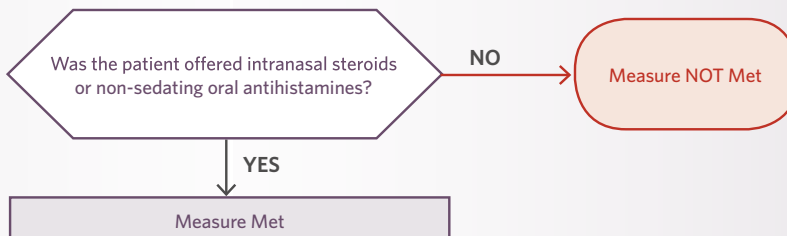
Percentage of patients with allergic rhinitis who are offered intranasal corticosteroids (INS) or non-sedating oral antihistamines.



DENOMINATOR



NUMERATOR



Visit www.entnet.org/2019-measures to see the QCDR measure flows.

Building on success and focused on the future

Metrics of success

Now in its third year, the Reg-ent registry is solidly positioned as the only national otolaryngology-head and neck surgery-specific data repository, one that is solely focused on the specialty of otolaryngology-head and neck surgery, its physicians, and its patients. After a successful first phase of development (CMS quality reporting), Reg-ent is now beginning additional phases of registry development, including research and data analytics. With close to seven million unique patients and over 12 million total patient encounters collected to date, Reg-ent is ready to support research in the specialty. The patient data in Reg-ent will continue to grow exponentially as more practices participate and contribute data—growth that has been accelerated by recent positive electronic health record (EHR) vendor developments that have opened the doors to more physicians utilizing EPIC and Cerner EHR systems from the academic and health system communities.

As Reg-ent prepares to expand its capabilities into research and data analytics, which will benefit all members regardless of practice setting, it continues to recognize the value of CMS quality reporting to many of our members and their practices. Over the past year, participating sites have increased engagement with Reg-ent and their data, with approximately 1,100 clinicians using Reg-ent to report some or all three categories of the Merit-based Incentive Payment System (MIPS) for the 2018 performance year (an increase from 120 clinicians reporting in Reg-ent's first year, 2016, and 700 in 2017).

Now, more than ever, Reg-ent participants engage with their data, connect with one another via the annual Reg-ent Users Conference at the AAO-HNSF Annual Meeting & OTO Experience, and are involved



in mapping refinement and data validation of Reg-ent performance measures, which includes 22 otolaryngology-specific measures designed by and for AAO-HNS members and available only in Reg-ent. (For additional information on the quality measures in Reg-ent, please see the article on page 23.)

Reg-ent participants are also committed to the success of the registry, which is evidenced by Reg-ent's renewal rate of 80 percent in 2019, with many renewing practices adding more clinicians to their accounts and, in turn, the registry. This commitment to the registry—and to the future of the specialty—is exemplified by the continued participation of existing practices and in Reg-ent's strong growth as new practices and new academic medical centers enroll.

EHR progress moves Reg-ent sites forward

Over the past year, positive results have been achieved with several EHR vendors, including Epic, eClinicalWorks, and Cerner, that had previously presented challenges in securing data for Reg-ent and other registries supported by FIGmd. With solutions now in place for capturing data from these EHR vendors, physicians and practices are now able to contribute their data electronically to Reg-ent.

With the launch of FIGmd's Registry Practice Connector (RPC) through the Epic app Orchard and the subsequent successful pilot with several Reg-ent sites, including the University of Mississippi Medical Center, academic medical centers are beginning the process for contributing their data to Reg-ent. In addition to the success with Epic, FIGmd has established data integration processes with Cerner, opening the doors for registry participation to academic sites with this EHR.

The University of Mississippi was the first academic site to integrate with the Reg-ent registry using the Epic app, which streamlines data integration via an Epic-approved solution. Oregon Health and Science University is close to full integration, and the University of Utah and Baylor University are beginning the integration process. Reg-ent is thrilled

Your participation makes a difference
to the future of otolaryngology

Visit us at www.entnet.org/about-reg-ent to learn more about how you can contribute your data to support the specialty of otolaryngology-head and neck surgery. To complete the registration process, visit us at www.reg-ent.org and click the sign up button at the top of the page.

to be bringing these institutions on board, along with others that joined Reg-ent only to experience challenges in securing and contributing data. New academic medical center participants are joining Reg-ent at a record pace and include Temple University and Thomas Jefferson University, both on Epic. Reg-ent is also making progress with Cerner sites, which include several academic institutions. To learn more about the Epic app, visit <https://www.entnet.org/Epic-and-Reg-ent>.

The launch of the eClinicalWorks ELIXIR program, a data push solution for cloud-hosted eClinicalWorks practices, allows practices and providers previously unable to integrate with Reg-ent the ability to electronically contribute their data to the registry. Since the launch of this solution in early 2019, the Reg-ent team has been engaging with these impacted practices (over 20 in total, with almost 70 providers).

Bringing these practices on board, along with new cloud-hosted eClinicalWorks sites, allows additional otolaryngologist-head and neck surgeons to contribute data to Reg-ent, increasing the power of the data in registry. To learn more about the eClinicalWorks ELIXIR program and Reg-ent, visit <https://www.entnet.org/eClinicalWorks-and-Reg-ent>.

Increasing the value of Reg-ent

Building on these significant achievements, Reg-ent is now entering its next phase of development, data analytics and research, all while continuing to support members with their reporting needs.

Research-focused policies and procedures are being finalized that will guide potential investigators through the process and will prioritize research data requests. Potential technology partners are being identified to support advanced data analytics that will allow for enhanced natural language

processing capabilities and ease clinical trial participation for Reg-ent's participating physicians.

As Reg-ent grows into this next phase of its development, it will continue to increase the value of the registry for its participants and to the specialty of otolaryngology-head and neck surgery—value that began with the foundation of MIPS reporting and specialty-based measures and is now increasing with these expanded capabilities.

We encourage all members to participate in Reg-ent, the most significant quality improvement initiative of the AAO-HNSF. Through participation in Reg-ent and contribution of data to the registry, members are individually and collectively impacting the future of the specialty in a positive and invaluable way. For more information on Reg-ent and assistance with either joining or renewing, please email reg-ent@entnet.org or visit www.reg-ent.org. ■



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participation
matters.



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harnesses the
power of data
to guide the
best ENT care.



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ARS 65th Annual Meeting

September 13-14, 2019

Hilton New Orleans Riverside, New Orleans, LA



Meeting Highlights:

14th Annual David W. Kennedy Lectureship
Guest Speaker: Robert Schleimer, PhD
 Chief, Allergy and Immunology
 Northwestern University Feinberg School of Medicine

- The ARS conference and housing is at the AAO-HNS Headquarter Hotel, *Hilton New Orleans Riverside*
- Welcome Reception
- 15th Annual David W. Kennedy Lectureship
- Resident's Cadaver and Didactic Workshop
- Resident's & Fellows Section
- Patient Advocacy & Coding Panel
- Women in Rhinology Section
- Poster Presentations
- Exhibit Hall
- Ancillary Lunch Symposiums
- Mentorship Program Section

The ARS welcomes the AAO-HNS' Guest Countries (FREE Registration):
 Philippines, Turkey, UK & Peru

ARS/AAOA Panel:

"What is 'Appropriate' in CRS diagnosis and treatment?"

This panel will address:

- Appropriate use of CT scans in the diagnosis of CRS
- Appropriate medical therapy prior to ESS and how this differs across CRS endotypes
- Appropriate use of cultures and bacterial/fungal sequencing in the clinical treatment of CRS patients
- Appropriate use of allergy testing/treatment in CRS patients

Questions?

Wendi Perez, ARS Executive Administrator
 Tel: 973-545-2735 (Option #6)
 Email: wendi@american-rhinologic.org

Deadlines:

Abstract Opens: 4/1/2019
Abstract Deadline: 6/17/2019
Manuscript Deadline: 8/1/2019

Housing: Open Now! Housing Deadline: 8/12/2019

Housing Registration Link: <https://book.passkey.com/e/49819122>

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Cleveland Clinic Head and Neck Institute

Strong growth has led to opportunities for both *newly trained* and *mid-career physicians* to practice as part of the Head & Neck Institute. Our caregiver team consists of over 100 Clinical Providers, including Otolaryngologists, Audiologists, Dentists/Oral Surgeons, Speech-Language Pathologists, and Advanced Practice Providers; with additional Supporting Caregivers.

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- Neurotologist
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- Sleep Apnea Surgery, Cleveland Clinic Florida

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All applications held in the strictest confidence.

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Atlanta, GA, USA

Department of Otolaryngology – Head and Neck Surgery

Course Director:

Esther X. Vivas, MD

Course Faculty:

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

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



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

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

In response to the rapid growth in our communities, the department has grown to now include 14 practitioners delivering care through all subspecialty areas of otolaryngology, a division of audiology, and a division of speech language pathology.

As a system, UTMB Health has similarly grown as exemplified by the building of two cutting-edge surgical hospitals and the acquisition of a third. With a light call schedule and generous benefits, this is an outstanding opportunity in one of the fastest growing geographic regions in the country.

Please direct your Letter of Interest and CV to:

Vicente Resto, MD, PhD, FACS
Physician Executive for Growth

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

Email: varesto@utmb.edu

Phone: 409-772-2701

Emory University

Emory University's Department of Otolaryngology - Head & Neck Surgery seeks a full-time Otolaryngologist at the rank of Assistant or Associate Professor to join a robust team who will have primary duties at the Atlanta Veterans Administration Hospital. An appointment at the level of Assistant Professor or Associate Professor is anticipated, depending upon the candidate's qualifications. The highly motivated team has long been actively involved in academic, research, and professional endeavors at the national and international levels. Opportunities to teach medical students, residents and fellows, and participate in scholarly activities. Duties will include patient care, resident and fellow teaching, and academic productivity. Special skills in Head and Neck Oncology and/or Laryngology are especially sought. Applicants must be Board Certified or Board Eligible and will have a University appointment.

The position comprises a clinical appointment in the Department of Otolaryngology at a level commensurate with credentials and experience, as well as an academic appointment in the Emory University School of Medicine. The job provides a competitive 12-month salary with excellent benefits.

Minimum Qualifications:

- Board Certified/Board Eligible in Otolaryngology
- Strong research and publication history, experience in clinical and research mentorship, a national reputation among colleagues within the otolaryngology community.
- Eligibility for a valid, unrestricted medical license to practice medicine in the state of Georgia
- A controlled Substance Registration Drug Enforcement Administration Certificate.

Positioned in northeastern Georgia at the foothills of the Appalachian Mountains, Atlanta is a vibrant, tree-canopied city consisting of many neighborhoods, each displaying its own unique characteristic. This capital city boasts permanent, professional, resident companies in all major performing arts disciplines, four major team sports franchises, over 300 parks and nature preserves, a temperate climate, a world-class restaurant scene, and more than 30 colleges and universities. Atlanta is one of the fastest growing U.S. cities, with a greater metropolitan population of over 6 million, and the world's busiest airport located a short ride away.

Contacts: Amaya Fields: Amaya.fields@emory.edu and Dr. Douglas Mattox: dmattox@emory.edu



Division of Otolaryngology Yale University, School of Medicine

The Division of Otolaryngology at the Yale School of Medicine is rapidly expanding across subspecialties and across the Yale-New Haven Health Systems. They are currently seeking Board Certified or Board Eligible Otolaryngologists to join our comprehensive and growing team. Applications are invited for the following full-time faculty positions:

- Pediatric Otolaryngologist
- Head and Neck Surgeon
- Otologist/Neurotologist
- Residency Program Director

Clinical responsibilities include providing patient care at Yale-New Haven Hospital in addition to outpatient clinics. In addition to clinical duties, our faculty members provide educational training to medical students and residents, and actively contribute to our research goals. Applicants should expect to work in a friendly environment with collegial and supportive administration.

We are seeking candidates with an outstanding academic record in research, clinical care and education. Candidates will have exceptional leadership talent and interpersonal skills and the commitment to make important contributions to the field of Otolaryngology. In addition to program planning and development, candidates should also have a strong background in quality assurance, educational and operational issues.

New Haven is conveniently located between Boston and New York. It is a great place to live, work, do business and enjoy life. There are ample opportunities to live within 20 minutes on the coast or in surrounding villages with small town charm. The greater New Haven area offers some of the top public and private schools in the country.

All application materials and questions should be submitted to:

Deb Kieslich, MBA

Division Administrator, Yale Otolaryngology

Phone: 203-737-1578

debra.kieslich@yale.edu

Review of applications will begin immediately and will continue until the position is filled.

Yale University is an Affirmative Action/Equal Opportunity employer. Yale values diversity among its students, staff, and faculty and strongly welcomes applications from women, persons with disabilities, protected veterans, and underrepresented minorities.



The Department of Otolaryngology at the University of Florida is seeking applicants who wish to pursue a career in Pediatric Otolaryngology. We are excited to announce 2 faculty positions: A Pediatric Otolaryngologist for our main campus in Gainesville, and either a Pediatric Otolaryngologist, or a General Otolaryngologist - with strong interest in Pediatric Otolaryngology - in Pensacola, Florida.

Gainesville: The division currently consists of 2 fellowship-trained Pediatric Otolaryngologists, within our growing department of 14 full-time University of Florida Faculty members.

The Division of Pediatric Otolaryngology is growing, and current practice locations include UF Health Shands Children's Hospital and the UF Health Children's Surgical Center. In addition, work has begun on the construction of a new, free-standing Otolaryngology clinic facility. The UF Health Shands Children's Hospital-recently ranked in 9 pediatric subspecialties in the 2018-2019 US News and World Report rankings-consists of 200+ inpatient beds, including a 24-bed PICU, 23-bed Pediatric Cardiac ICU, 68-bed NICU, and a Level I pediatric trauma center and Emergency Department.

A fellowship in Pediatric Otolaryngology is strongly encouraged. Applicants should also be board certified or board eligible and licensed (or eligible) to practice in Florida. Additionally, active involvement in both Otolaryngology resident and medical student education is expected.

Gainesville is a charming city and home to the University of Florida. The area is known for its natural beauty, with many springs, lakes and rivers. The mild climate encourages outdoor activities and residents enjoy swimming, boating, fishing, bicycling and camping. Culturally, the city is enriched by the influence of the university. The population of Gainesville is approximately 111,000 with a surrounding population of 250,000. We have a diverse culture, excellent public schools, low cost of living and no state income tax. For the past 8 years Gainesville has been voted among the Top 12 "Most Livable Cities in the Nation" by Money Magazine.

Pensacola: We are excited to announce an expanded partnership with The Studer Family Children's Hospital at Sacred Heart in Pensacola. We are seeking either a fellowship-trained Pediatric Otolaryngologist, or a General Otolaryngologist with an interest in Pediatric Otolaryngology for Northwest Florida's only children's hospital.

Located in the Florida Panhandle-amidst the world's whitest sand beaches-Pensacola has been named in CNN/Money Magazine's "Best Cities to Live" and has been named "Boomtown" by Inc. Magazine. Pensacola offers beautiful homes to suit any budget, offers a cost of living that is well below the national average, along with excellent schools, no state income tax, and numerous outdoor activities. Here you can live and practice where others only dream of living!

Candidates should have completed a fellowship in Pediatric Otolaryngology, or a General Otolaryngology residency from an ACGME accredited program, be board certified or board eligible, and licensed (or eligible) to practice in Florida.

Please apply online at <https://facultyjobs.hr.ufl.edu> and search for "Otolaryngology" for either position. After applying, please send a letter of interest and CV to:

William O. Collins, M.D., FACS, FAAP
Associate Professor
Chief, Division of Pediatric Otolaryngology
William.collins@ent.ufl.edu

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Interested candidates please submit CV and letter of interest to:

Amy Gonzales, Practice Administrator
amgwent@aol.com



Harvard Department of Otolaryngology/ Massachusetts Eye and Ear

The Massachusetts Eye and Ear Department of Otolaryngology, Head and Neck Surgery is actively recruiting a qualified candidate in General (Comprehensive) Otolaryngology at our suburban location in Concord, Massachusetts.

Comprehensive Otolaryngology, Concord

This position includes general otolaryngology clinic and surgery with an academic connection to our main campus in Boston for tertiary clinical care, research and teaching.

At the Massachusetts Eye and Ear, our goal is to deliver the very best health care in a safe, compassionate environment and we continually strive to create a diverse, inclusive faculty and staff. Minority candidates and individuals with disabilities are encouraged to apply.

Please send a letter of interest and curriculum vitae to:

D. Bradley Welling, MD, PhD, FACS

Chief of Otolaryngology

Massachusetts Eye and Ear

243 Charles Street, Boston, MA 02114

Brad_Welling@meei.harvard.edu

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



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

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

We offer new associates:

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- A well-traveled road to partnership without buy-ins and buy-outs
- A governance structure that gives you a voice from Day 1, and colleagues who understand there is more to life than just practicing medicine

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

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

T32 Instructor/Postdoctoral Research Fellowship in the Department of Otolaryngology-Head and Neck Surgery, Stanford University School of Medicine

The Department of Otolaryngology-Head and Neck Surgery at **Stanford University School of Medicine** seeks a post-residency fellow to join the department to pursue a NIH/NIDCD funded research fellowship. This is a two-year position with 75% dedicated research time and 25% clinical time. The standard National Match process guidelines will be followed. This research training can also be combined with clinical fellowship training in Otolaryngology subspecialties, creating a three-year combined training experience.

We expect the successful candidate to pursue a career as a clinician-scientist and this fellowship offers both the protected, mentored research training and some independent, clinical duties to help prepare for such a career. The candidate will carry out research in areas aligned with the NIDCD mission, join a research-intense faculty, and be an active teacher of medical students and residents, while developing a robust research program.

Stanford University is an equal opportunity employer and is committed to increasing the diversity of its trainees. It welcomes nominations of and applications from women, members of minority groups, protected veterans and individuals with disabilities, as well as from others who would bring additional dimensions to the university's research, teaching and clinical missions. Per NIH eligibility requirements, the applicant must be a citizen, non-citizen national and permanent resident of the United States.

We are accepting submissions until the position is filled. Please submit curriculum vitae, 1-page statement of purpose discussing long-term goals as a clinician-scientist, 1-page statement regarding Stanford research laboratories applicant are interested in and why, PDFs of research papers applicant has published and the names and contact information of three references to:

Amy Dao
amydao@stanford.edu 650-721-2880 (phone) 650-721-2163 (fax)
Department of Otolaryngology-Head and Neck Surgery
801 Welch Road, 2nd Floor, Stanford, CA 94305

Fellowship in Laryngology/ Care of the Professional Voice

Dates: July 1, 2021 – June 30, 2022

**American Institute for Voice and Ear Research
Drexel University College of Medicine
Hahnemann University Hospital
Philadelphia, Pennsylvania**

Our fellowship has a special focus on care of the professional voice, but we provide comprehensive training in all areas of laryngology including neurolaryngology, dysphagia and airway disorders. We provide extraordinary academic training and research opportunities. All fellows have published numerous articles and several have co-authored books during fellowship.

Dr. Robert Sataloff, Fellowship Director and Chairman of the Department of Otolaryngology – Head & Neck Surgery at Drexel University College of Medicine, will conduct preliminary interviews at this year's Annual Meeting of the American Academy of Otolaryngology – Head and Neck Surgery in New Orleans. For applicants not attending the Academy meeting, other arrangements can be made.

If you would like to schedule an interview, please contact Debbie Westergon, Executive Assistant, at (215) 762-5165 or office@phillyent.com.



Hassenfeld Children's Hospital

Pediatric Otolaryngology Physician (New York, NY)

Full-Time – Immediate Opening

The NYU Langone Health Department of Otolaryngology - Head and Neck Surgery seeks fellowship-trained pediatric otolaryngologists to join the division of pediatric otolaryngology at the assistant or associate professor level.

Hassenfeld Children's Hospital at NYU Langone, completed in 2018, is a state-of-the-art children's hospital providing world class care as part of NYU Langone Health. Additionally, NYU Langone Health has expanded into Brooklyn at NYU Langone Brooklyn Hospital and Long Island at NYU Langone Winthrop Hospital.

The division of pediatric otolaryngology at NYU Langone Health engages in all subspecialty care within pediatric otolaryngology including general pediatric otolaryngology, airway, sinus, otology, voice, craniofacial and multi-specialty care.

In this full-time role as a clinical pediatric otolaryngologist one will provide care for children and young adult patients as well as teach NYU School of Medicine residents and students and participate in clinical research. There is also a 1 year fellowship in pediatric otolaryngology. The new faculty member will teach and supervise the fellow in complex pediatric otolaryngology.

- Consults within the hospital setting will be covered in a shared manner within the division.

NYU Langone Health is an Equal Opportunity Affirmative Action Employer.

- Patient evaluation and management is provided at several outpatient locations throughout Manhattan, Brooklyn, and Long Island. Surgical care is provided at Hassenfeld Children's Hospital in Manhattan, Bellevue Hospital in Manhattan, NYU Langone - Brooklyn Hospital, and NYU Winthrop in Long Island.
- The Division includes 4 pediatric otolaryngologists and 2 physician assistants, one hospital based and one outpatient based at the main Manhattan campus.
- All faculty perform inpatient surgery at Hassenfeld Children's Hospital and Bellevue Hospital in Manhattan, as well as outpatient surgery at the Ambulatory Care Center in Manhattan.
- The candidate will spend 2-3 sessions per month at Bellevue hospital as all NYU faculty share coverage at Bellevue.
- On Call will be shared within the NYU Otolaryngology department as per departmental policies.
- Academic appointment at the Assistant/Associate Professor level depending on experience.
- Interested candidates must be BC/BE in otolaryngology and have completed a pediatric otolaryngology fellowship

Interested physicians should contact:

Scott Rickert, MD; scott.rickert@nyulangone.org



Harvard Department of Otolaryngology/ Massachusetts Eye and Ear

The Massachusetts Eye and Ear Department of Otolaryngology, Head and Neck Surgery is actively recruiting a qualified candidate in General (Comprehensive) Otolaryngology at our main campus at 243 Charles Street, Boston, Massachusetts.

Comprehensive Otolaryngology/ER, Main Campus

This position will include clinical efforts in our Otolaryngology specific Emergency Room, the provider's own comprehensive otolaryngology clinic, time staffing inpatient consults with residents at the adjacent Massachusetts General Hospital and dedicated operating room time. There will be regular interactions with otolaryngology trainees and medical students, particularly while working in the Emergency Room. The ideal candidate will have had strong training in general otolaryngology, interest in teaching and mentoring otolaryngology residents and seek a career in Comprehensive Otolaryngology in an academic setting. Research opportunities are available including collaboration across a wide variety of disciplines, although the primary institutional goal for this position is the delivery of clinical care and resident teaching.

At the Massachusetts Eye and Ear, our goal is to deliver the very best health care in a safe, compassionate environment and we continually strive to create a diverse, inclusive faculty and staff. Minority candidates and individuals with disabilities are encouraged to apply.

Please send a letter of interest and curriculum vitae to:

D. Bradley Welling, MD, PhD, FACS

Chief of Otolaryngology

Massachusetts Eye and Ear

243 Charles Street, Boston, MA 02114

Brad_Welling@meei.harvard.edu

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



Complete Care. Trusted Doctors.

Ear • Nose • Throat • Allergy

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

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

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

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

Contact information:

Please send resumes to HR@centamedical.com



EXCITING OPPORTUNITY

Atlanta Center for ENT has an opportunity for a full time Board Certified Otolaryngologist in the Buckhead area of Atlanta, Georgia.

Atlanta Center for ENT has a unique opportunity for a talented Board Certified ENT surgeon who is a self starter and a practice builder in the Buckhead area of Atlanta, Georgia.

The practice includes a strong support staff and an Certified Ambulatory Surgical Center on site which yields a superior compensation opportunity via participation in ASC facilities reimbursement, with a potential opportunity for ownership. All aspects of ENT are practiced with a special interest in endoscopic sinus surgery

Contact information:

Donald Dennis, MD, FACS
3193 Howell Mill Rd.

Suite 215
Atlanta, GA. 30327
404-355-1312

ddennis@sinussurgery.com

BE PART OF NEW YORK'S PREMIER ENT PRACTICE

One of the largest and most established private practices in the Greater New York area.

Specializing in all facets of General Otolaryngology, Facial Cosmetic Surgery, Laryngology, and Otology.

Offices conveniently located in Queens, Long Island, Brooklyn and The Bronx.

For more information contact Carlos Lopez at (516) 220-6448 or carlos.lopez@nyents.com



Ear, Nose & Throat Associates of New York, P.C.
Hear Better, Breathe Better, Feel Better
www.nyents.com

SOUTH FLORIDA ENT ASSOCIATES



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

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

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

This position will include both office and hospital settings.

Requirements:

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

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

Contact Information:

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



Rutland Regional Medical Center

An Affiliate of Rutland Regional Health Services

Otorhinolaryngologist Rutland, Vermont

We are looking for a full-time or 2 part-time Otolaryngologists, to join our well established, hospital owned practice. \$25k signing bonus. ER call 1:4. Join 2 other surgeons in this practice, with three Physician Assistants. Clinical faculty appointment possible. Teaching opportunity with med students and Advanced Practitioner students if desired. Board Certified or Board Eligibility with intent to become board certified.

Generous benefits of Malpractice, Health, Dental, and Disability insurances, 403b with hospital match, Defined Contribution retirement account, and tax-deferred earnings program. \$6000 annual CME allowance. Relocation program offered.

There are two office locations. Each location has a fully developed Audiology program.

Well established EMR with hospital and home digital x-ray viewing capability.

100 bed community hospital with ER volume of 36,000 patient visits per year. ER physicians are residency trained. ICU with 24-hour intensivist coverage. Hospital based Community Cancer Center with COC certification. Service area 85,000 and new ENT Medical Office Building plans.

Great family oriented community with vast array of outdoor activities at your doorstep including 2 ski resorts within 20 minutes of hospital. Located in the Heart of the Green Mountains, near the base of Killington Ski Resort, our location offers wonderful recreational fun, good schools in safe communities, and easy access to Boston, Montreal, and NYC. This is a chance to practice and live in a location most desire for vacation.

RRMC was recognized by U.S. News and World Report as one of 42 Best Hospitals for Common Care conditions and procedures. We received an "A" rating from The Leapfrog Group for hospital safety and 2015 Healthgrades Patient Safety Excellence Award. RRMC scored in the top 5% of hospitals in national standardized Press-Ganey Physician Survey for "Teamwork between providers and nurses", "Expertise of nursing staff", and "Performance of Administration". We are also a recognized Nursing Magnet Hospital.



Rebecca Banco, CMSR, DASPR
Inhouse Physician Recruiter, Rutland Regional Medical Ctr, rbanco@rrmc.org



UNIVERSITY OF CALIFORNIA – DAVIS

PEDIATRIC OTOLARYNGOLOGIST - The Department of Otolaryngology at the University of California, Davis, School of Medicine, located at the UC Davis Medical Center in Sacramento, California, is seeking an academic full-time Pediatric Otolaryngologist at the Assistant, Associate or Full Professor level in the clinical series to participate in clinical, teaching and research programs. Candidate is required to have an MD degree, be fellowship trained in pediatric otolaryngology, board certified or board eligible in Otolaryngology, and be eligible for a California medical license.

In addition to clinical responsibilities, candidate will be expected to fully participate in departmental programs, including teaching of medical students and residents; and must be able to work cooperatively and collegially within a diverse environment. Leadership opportunities exist within the pediatric division.

Qualified applicants should apply online at UC Recruit: <https://recruit.ucdavis.edu/JPF02726> by uploading current curriculum vitae with bibliography, letter of interest, statement of contributions to diversity, and the names and contact information of at least three professional references.

For more information, please contact Dr. Maggie Kuhn at: makuhn@ucdavis.edu

For full consideration, applications must be received by December 30, 2019; however, the position will remain open until filled.

UC Davis commits to inclusion excellence by advancing equity, diversity and inclusion in all that we do. We are an Affirmative Action/Equal Opportunity employer, and particularly encourage applications from members of historically under-represented racial/ethnic groups, women, individuals with disabilities, veterans, LGBTQ community members, and others who demonstrate the ability to help us achieve our vision of a diverse and inclusive community. For the complete University of California nondiscrimination and affirmative action policy see: <http://policy.ucop.edu/doc/4000376/NondiscrimAffirmAct>. UC Davis Health welcomes applications from women and under-represented minorities. The University has a strong institutional commitment to the achievement of diversity among its faculty and staff.

Under Federal law, the University of California may employ only individuals who are legally able to work in the United States as established by providing documents as specified in the Immigration Reform and Control Act of 1986. Certain positions funded by federal contracts or sub-contracts require the selected candidate to pass an E-Verify check. More information is available at: <http://www.uscis.gov/e-verify>.

UC Davis is a smoke and tobacco-free campus (<http://breathefree.ucdavis.edu/>)

University of Missouri Department of Otolaryngology— Head and Neck Surgery

Seeks a clinician, teacher, and researcher who is personable, energetic and innovative to join a rapidly growing and collaborative group of physicians, most of whom have subspecialty interests and training. There is a Faculty opportunity at all academic ranks (Assistant/Associate Professor or Professor) available in:

- **Pediatric Otolaryngology**
- **Otolaryngic Allergy**

Title, track, and salary are commensurate with experience. This position is affiliated with MU Health Care which includes the University of Missouri Hospital and MU Women's and Children's Hospital.

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

For additional information about the 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 website at <https://hr.missouri.edu/find-a-job/academic/>.
The University of Missouri is an Equal Opportunity/Affirmative Action/Pro Disabled & Veteran Employer.

Otologist/Neurotologist Department of Otolaryngology- Head and Neck Surgery Washington University School of Medicine

The Department of Otolaryngology-Head and Neck Surgery at Washington University School of Medicine in St. Louis, MO is seeking an otologist/neurotologist with experience and interest in vestibular disorders to assume a thriving academic balance practice and direct the Dizziness and Balance testing center. Applicants may apply for an assistant, associate or full professor appointment based on prior experience and training. Practice could include surgical management of otologic and neurotologic disorders in addition to running the department's balance clinic and testing facility. The department has vast opportunity to provide cutting edge patient care in addition to basic, translational and clinical research experience. Collaboration with existing departmental clinical and basic investigators is encouraged. Salary is negotiable and commensurate with rank, training and experience.

Interested candidates should apply at <https://facultyopportunities.wustl.edu>.

THE
University of Vermont
 HEALTH NETWORK
Champlain Valley Physicians Hospital **Plattsburgh, NY**
Surgeon
Otolaryngology

The Department of Surgery at the University of Vermont College of Medicine is seeking a Clinical Practice Physician in the Division of Otolaryngology to join the Champlain Valley Physicians Hospital (CVPH) in Plattsburgh, New York. CVPH is a progressive medical center with nine state-of-the-art OR's and Ambulatory Surgery Center. The position entails providing Otolaryngology services to the patient population served by CVPH, a community medical center which is a regional referral hospital partnered with the University of Vermont Medical Center. This position offers the unique opportunity to work in a community setting while having an active affiliation with Vermont's only Academic Medical Center; the only ACS verified Level 1 trauma center in the state providing tertiary care to patients from Vermont and Northern NY.

Applicants must be board certified or board eligible and eligible for medical licensure in the state of New York. This is a full-time, 12 month, salaried position.

Plattsburgh is located on the shores of Lake Champlain, near the Adirondack Mountains, Olympic-Lake Placid region, Montreal and Burlington, VT.

The University is especially interested in candidates who can contribute to the diversity and excellence of the academic community through their research, teaching, and/or service. Applicants are requested to include in their cover letter information about how they will further this goal.

The University of Vermont is an Equal Opportunity/Affirmative Action Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, protected veteran status, or any other category legally protected by federal or state law. The University encourages applications from all individuals who will contribute to the diversity and excellence of the institution.

Interested individuals should apply via: <https://www.uvmjobs.com/postings/22472> and may direct any inquiries to Division Chief, William Brundage, MD c/o Kristin Allard at Kristin.Allard@uvmhealth.org.

Willamette ENT[®]

Ear • Nose • Throat

Willamette ENT, a six physician premier ENT practice located in Salem, Oregon, is seeking a dedicated general otolaryngologist (sub-specialty interests will be considered) to join our practice serving the beautiful Willamette Valley.

This is an opportunity to be part of an established single-specialty clinic on a physician owned campus with a large clinic and ambulatory surgical center (ASC). The clinic provides comprehensive and collaborative full-service ENT including allergy, CT services, home sleep studies and audiology services with six audiologists and excellent support staff. Facial plastic procedures and complete office rhinology procedures can be performed in the clinic procedure room including BSP and ESS.

Our onsite ASC has three surgical suites with image guidance and nerve monitoring equipment. We currently have one position available as we expand to seven ENT physicians to meet the growing demand of the community.

We offer an excellent compensation package with partnership potential, generous 401k with employer match and profit sharing, health, dental, vision, disability, life, PTO and malpractice with tail coverage options.

Requirements:

- M.D./D.O. degree, board certification or board eligible
- Licensed in Oregon or eligible for Oregon licensure

Located in the Pacific Northwest, the Willamette Valley is in close proximity to Portland, the coast, the high desert and the Cascade Range, and is home to more than 500 wineries. The area offers abundant outdoor recreation opportunities including beautiful lakes and rivers, endless hiking trails and beautiful golf courses. Salem offers outstanding schools, excellent restaurants, theater and symphony with a lower cost of living. For a glimpse of Salem, go to www.youtube.com/watch?v=GHTWUBLT-tQ.

For more information about our clinic, please visit ENTSalem.com.

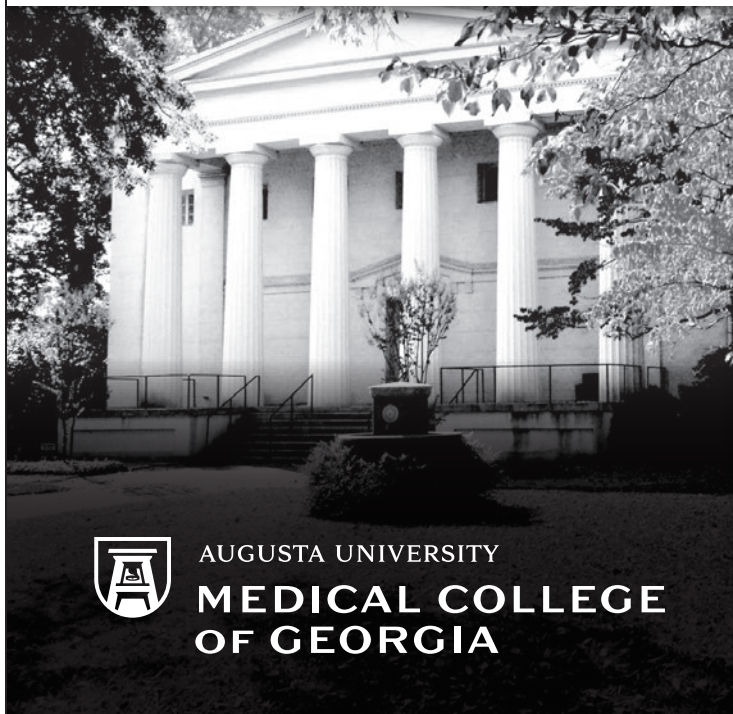
Please contact or send CV to:

Kim Robbins, HR Director

Email: kimr@entsalem.com

Phone: 503-485-2574 Fax: 503-584-7991

Positions are available at the Assistant or Associate Professor level in the Department of Otolaryngology-Head & Neck Surgery



AUGUSTA UNIVERSITY
**MEDICAL COLLEGE
OF GEORGIA**

PEDIATRIC OTOLARYNGOLOGIST

- Excellent opportunity at our Children's Hospital of Georgia
- Rank commensurate with experience
- Excellent resources are available
- Fellowship training required

OTOLOGIST/NEUROTOLOGIST

- Rank commensurate with experience
- Excellent resources are available
- Fellowship training required

To apply and receive additional information, please contact:

Stil Kountakis, MD, PhD
Professor and Chairman
Department of Otolaryngology-Head & Neck Surgery
1120 Fifteenth Street, BP-4109
Augusta, Georgia 30912-4060

Or email skountakis@augusta.edu

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SURGEONS**
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NEW ENGLAND, LLC



Ear, Nose & Throat Surgeons of Western New England is seeking a Board Certified or Board Eligible Otolaryngologist to join our busy practice.

Ear, Nose & Throat Surgeons of Western New England is seeking a Board Certified or Board Eligible otolaryngologist to join our busy practice. A strong generalist, a pediatric subspecialist or someone with virtually any type of subspecialized interest would do very well in this thriving environment. The current breadth of our robust practice includes advanced endoscopic sinus surgery, head and neck cancer, laryngology, endocrine surgery, otology/neurotology, pediatric otolaryngology, and allergy testing and treatment. Our office provides video stroboscopy, CT scans, VNG testing, ABR testing, and on-demand audiology.

Currently, our practice employs seven Physicians and five Physician Assistants, with offices in Springfield, Northampton and Ware. With a 50-year history of providing comprehensive Otolaryngologic care for residents of the Pioneer Valley, our practice is the primary source for otolaryngology care at Baystate Medical Center, our 716-bed Level 1 trauma center and tertiary care teaching hospital, as well as at three community hospitals, Baystate Mary Lane Hospital, Mercy Medical Center and Cooley Dickinson Hospital. We perform surgery at the hospitals and at our physician-owned surgery center, Pioneer Valley Surgicenter. We are committed to providing comprehensive university-level care with the benefits of private practice.

This new position will allow us to expand our growing practice office locations. We are looking for an energetic, self-confident individual who can work both independently and in a group environment. Our physicians are here to serve as supportive team members for a confident generalist or someone with subspecialty interests who is ready to start their career.

Our location in western Massachusetts offers a community lifestyle with the benefits of easy access to Boston (1 1/2 hours), New York City (2 1/2 hours) and Vermont skiing (1 hour). Northampton is a well-recognized center of art, theater, music and quality restaurants. Favorable cost of living with competitive salary, productivity bonus, and a full benefits package possibly leading to partnership and excellent long-term income potential make this an opportunity that should not be overlooked.

If you are interested Please Click Apply! Or if you know a recent graduate or senior resident who may be looking for an opportunity such as ours in western Massachusetts, please forward them our information as well as the contact information below. Also a visit to our website at www.entsurgeons.us would provide them further data on our growing practice.

Direct Contact Information:
Barry Jacobs, MD, FACS
brjacobs@entsurgeons.us
Phone: 413-732-7426
Fax: 413-732-0650

Jerry Schreibstein, MD, FACS
jschreibstein@entsurgeons.us
Phone: 413-732-7426
Fax: 413-732-0650

Otolaryngologist

Expanding Practice in York, PA

A well established, busy five physician group in York, Pennsylvania is looking to add a sixth, full time Board Eligible/Board Certified Otolaryngologist. Our services include Audiology and Hearing Aid Sales. Our office has been running on an EMR system since 2006. On-Call rotation is 1:6. Initial employment includes an excellent salary and productivity bonus. Partnership offered after 1 to 2 years of employment.

York is a fast growing community with excellent schools and a very comfortable cost of living. It is convenient to Baltimore, Washington and Philadelphia.

Local inpatient hospital is well run and state-of-the-art. Surgical Center is well equipped, and partnership in the Surgical Center is available.

We are looking for a dynamic, motivated individual for partnership track. Income potential in the 90th percentile.



Contact: Renee Gohn
Office: 717-843-9089 Email: yorkent@comcast.net

UF | UNIVERSITY of FLORIDA

The University of Florida Department of Otolaryngology is seeking applicants who wish to pursue an academic career in General Otolaryngology at the rank of Assistant, Associate, or Full Professor. Track and rank will be commensurate with experience. The department has 14 full-time faculty members and 15 residents. The desired candidate should possess a strong commitment to both clinical practice as well as resident teaching. Applicants should be board certified or board eligible and licensed (or eligible) to practice in Florida. Significant relevant clinical experience and/or fellowship training in the chosen field is desired. Salary is negotiable and will be commensurate with experience and training.

To Apply, please go to <https://jobs.ufl.edu>, select "Faculty/Postoc" search using "Otolaryngology, Gainesville". After applying, please send your CV and cover letter to:

General Otolaryngology
Department of Otolaryngology
Attn: **Brian Lobo, MD**
University of Florida
PO Box 100264
Gainesville FL 32610-0264
Email: brian.lobo@ent.ufl.edu

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



Otolologist/Neurotologist

Ochsner LSU Health Shreveport
Department of Otolaryngology-Head and Neck Surgery

Position for an Otolologist/Neurotologist at the
Assistant/Associate/Full Professor Level

Candidates must be fellowship trained and BC/BE by the
American Board of Otolaryngology

This is a unique opportunity to further cultivate and develop a robust practice in chronic ear, skull base, cochlea implants and implantation devices in a tertiary care center that draws patients from the entire Arkla-Tex area. Responsibilities include building a clinical practice, resident teaching, temporal bone laboratory and research. Excellent skull base referral source already established with Neurosurgery. The neurosciences center allows for an excellent opportunity to also build a research program.

Direct Contact Information:

Please send curriculum vitae, a statement of current interests, and names of three references to:

Cherie-Ann Nathan, MD, FACS
Professor and Vice-Chairman,
Director of Head and Neck Surgical Oncology
1501 Kings Highway, 9-203
Shreveport, LA 71103-33932
Telephone: 318-675-6262
Fax: 318-675-6260

E-mail: cnatha@lsuhsc.edu

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

General Otolaryngology

Excellent opportunity to purchase an established
Otolaryngology Practice in northeast Metro Atlanta.

The adult and pediatric ENT practice of 34 years including
on-site Audiology and Hearing Aid Services.

Family Friendly location with highly rated public school
systems and universities.

Contact: ent.4985@gmail.com



Division of Otolaryngology Yale University, School of Medicine

The Department of Surgery, Division of Otolaryngology at the Yale School of Medicine is now accepting applications for Head and Neck Fellowship to start in July 2020. This fellowship is in its 7th year and will provide advanced training in head and neck surgical oncology with high volume cancer extirpation and reconstruction including minimally invasive approaches (transoral robotic/laser surgery and sialendoscopy), as well as regional and free tissue transfer. Yale Cancer Center is one of 47 NCI-designated Comprehensive Cancer Centers in the nation and the head and neck cancer team includes a robust weekly multi-disciplinary tumor conference, the latest in clinical trials, and opportunities for clinical and basic science research.

By July 2020, qualified candidates should have completed a residency in Otolaryngology and be board eligible or certified. Clinical Fellowships are one year in duration.

Applicants should submit a CV, personal statement, and references with three letters of recommendation, one of which should be from the Chair of the Department in which residency was completed. Interviews will be conducted on a rolling basis and offers made soon after.

Application materials should be submitted by August 31, 2019 and sent to:

Christy Tucker
Yale Otolaryngology
47 College Street, Suite 216
New Haven, CT 06519-1369
Phone 203-785-4862
christy.tucker@yale.edu



**Board Certified, Director of GME Education
Department of Otolaryngology – Head & Neck Surgery
Worcester, MA**

UMass Memorial Medical Center, the clinical partner of the University of Massachusetts Medical School in Worcester, MA, is seeking a Board Certified Otolaryngologist to serve as the **Director of GME Education** with a minimum of 3 years of clinical practice in the specialty post-residency/fellowship, a minimum of 1 year of experience as an associate program director of an ACGME accredited Otolaryngology program or 3 years of participation as an active faculty member of an ACGME accredited Otolaryngology program, and evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of residents. The appropriate candidate must have a proven ability to develop and enhance the educational program for UMMS medical students, as well as playing a vital role in the development of a new residency program as directed by the Department Chair.

UMass Memorial Health Care is the largest healthcare system in Central Massachusetts. As the clinical partner of UMass Medical School, you will have access to the latest technology, research and clinical trials. Come join an established group of eight physicians in a busy tertiary care referral center. We are looking for ideal candidates with energy, desire, and drive to ramp up their careers and help expand our scope and presence. There are ample opportunities for clinical and basic science investigation and research. An academic appointment commensurate with education and training is offered.

Centrally located, Worcester is just miles from Boston, Providence, Berkshire mountains, mountains of Vermont and New Hampshire, Cape Cod beaches, Martha's Vineyard and Nantucket. The diverse city of Worcester has nine colleges and universities including the University of Massachusetts Medical School that overlooks Lake Quinsigamond. As the second largest city in New England, it has powered a rise of biotechnology, research, manufacturing and healthcare industries. Worcester is also home to the Hanover Theatre for Performing Arts, Worcester Art Museum, Mechanics Hall and the family-friendly Ecotarium.

Come join the Best Place to Give Care, the Best Place to Get Care, and the best place for YOU!

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

**Daniel Kim, MD, FACS
Chairman and Professor
Department of Otolaryngology - Head and Neck Surgery
UMass Memorial Medical Center
c/o Adriana Dietlin, In-House Physician Recruiter
Department of Human Resources
Email: Adriana.Dietlin@umassmemorial.org**

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