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Mission Statement

The Department of Otolaryngology of SUNY Downstate Medical Center, recognizing its medical, ethical and social obligations to Brooklyn and adjacent communities, is committed to the delivery of comprehensive, compassionate and cost-effective otolaryngologic care. Towards this end, the department working as a team with hospitals and the community is dedicated to the following:

1. Ongoing provision of medical and surgical treatment for diseases of the ear, nose, throat, head and neck;

2. Ongoing provision of diagnosis, intervention and therapeutic treatment for all communicative disorders;

3. Excellence in medical student, resident and postgraduate education;

4. Pursuit of high quality scientific research by all departmental staff and its full integration into the resident training program;

5. Dissemination of otolaryngologic information to patients, their families, primary care physicians and all members of the Brooklyn and adjacent communities.
State of the Department 2011

Richard M. Rosenfeld, MD, MPH
Professor, Chairman, and Program Director

Another year has leapt by, leaving our department even stronger than the last: more faculty, expanded services, fabulous residents, and renovated facilities. Although it is easy to say simply “in times like these it helps to remember there have always been times like these,” I submit that this past year was indeed a bit different, not the least bit due to a unique institutional merger, described below, 150 years in the making.

The 2010-2011 academic year marked a special anniversary – the 20th – of the Department of Otolaryngology at SUNY Downstate Medical Center and affiliated hospitals. Formed initially from existing services at Long Island College Hospital (LICH) and University Hospital of Brooklyn (UHB), the current academic structure for resident and medical student education includes affiliations with Kings County Hospital Center (KCHC), the Brooklyn Veterans Administration Medical Center (VAMC), and Maimonides Medical Center. The department benefits from thirteen full-time faculty, more than two dozen voluntary and part-time physicians, and from strong administrative support at all institutions.

As the only otolaryngology training program in a borough of 2.5 million (known) inhabitants we have the keys to a kingdom once called “the forty-ninth state.” Indeed, if the borough were a state it would be the fourth most populous. Brooklyn symbolizes American qualities of ambition, brashness, wiseguy humor, street smarts, and underneath the toughness, a soft touch. This “soft touch” continues to be an undercurrent of our outstanding department, manifest daily in the warm, congenial, and respectful interactions between students, residents, and faculty.

An Historic Merger

On May 31, 2011 the night shift at LICH arrived to a private, not-for-profit, hospital that was part of Continuum Health Partners. When they left the next morning they exited UHB at LICH, now a state hospital that is part of SUNY Downstate. Never before had such a merger between a private hospital and state healthcare system taken place.

I am often asked “what do you think of the merger – is it a good thing?” The answer is an unequivocal yes, because it is a win-win arrangement for both institutions. LICH immediately expanded its patient base to accommodate UHB overflow, acquired enhanced – and sustainable – malpractice coverage for all services, and received a major financial boost from state and federal grants that were tied to the merger. SUNY acquired prime space for medical student education, added over 500 inpatient beds to the overburdened clinical capacity of UHB, and now enjoyed the influence and prestige of a medical staff exceeding 700 clinicians with the broadest geographic sweep of any Brooklyn healthcare system.

The SUNY and LICH merger is “historic” not simply because of its unique circumstances, but because of deep historical ties. “History is a guide to navigation in perilous times,” writes American author David C. McCullough, “History is who we are and why we are the way we are.” Since we can likely agree that current times are a bit perilous, a few words are justified about our intriguing past.

The Long Island College Hospital was officially named in 1857 and was chartered in 1858 as the first medical school in America associated with a hospital. In 1860 the first graduates emerged, having met the requirements of good moral character, two full courses of lectures, three years of study under a regular practitioner, and a handwritten thesis on some medical subject. After the Flexner Report in 1910 the College enhanced its laboratory instruction and facilities, achieving a Class A rating in 1914 from the Council on Medical Education.

A link between Brooklyn Heights and East Flatbush took shape in 1923, when LICH sent students to Kings County Hospital under an affiliation agreement with the New York City Department of Public Welfare. In 1930 the University of the State of New York granted a charter to the Long Island College of Medicine, allowing, for the first time, the college and hospital to exist independently. The college merged with SUNY in 1950, with the cornerstone laid in 1954 for a Basic Science Building at 450 Clarkson Avenue (at a ceremony presided over by President Eisenhower), which would be the most modern college facility of the time.
The SUNY-LICH merger, therefore, makes sense at the most fundamental level because, in McCullough’s words, it is “who we are.” We have come full circle, from Brooklyn Heights to East Flatbush and back again, creating an expansive educational network with limitless potential and a rock solid foundation of state support.

Although the Department of Otolaryngology had been functionally merged with SUNY Downstate for 20 years, the new fully merged situation has significant benefits that include greater flexibility in recruiting new faculty, enhanced ability to accommodate clinical needs of all faculty with three practice sites (Bay Ridge, East Flatbush, Brooklyn Heights), and a stronger financial position because of a single faculty practice plan with greater transparency. As one of only a few departments with a common chairman at both SUNY and LICH, we have been able to navigate the merger nimbly and are poised to take full advantages of all it offers.

Bringing Quality Care to Brooklyn

Of the three pillars that support all academic departments – research, teaching, and patient care – it is often the ability of a department to serve the community with quality care that most affects the daily lives of the patients and families. With this in mind, I will briefly summarize the current state of our varied clinical programs.

Facial plastic and reconstructive surgery has shown continued growth through the leadership of Richard Westreich, Sydney Butts, and Afshin Parhiscar, who cover all aspects of trauma, cosmetic, microvascular, and reconstructive surgery. Our cleft and craniofacial initiative is well underway and should be facilitated by the SUNY-LICH merger.

Head, neck, and skull-base surgery enjoy continued excellence under the leadership of Krishnamurthi Sundaram, Perminder Parmar, and Michael Weiss, with additional expertise provided by Gady Har-El, Jessica Lim, Victor Lagmay, and voluntary faculty. Dr. Parmar has unfortunately left the department in July 2011, but we have seen robust interest in the open position by many highly-qualified, fellowship-trained applicants.

Otology and neurotology remain vibrant through the leadership of Matthew Hanson, Neil Sperling, Abraham Shulman, and voluntary faculty. Patients with cochlear implants have been well served by our partnership with the Auditory Oral School of New York, which provides state-of-the-art mapping, support services, and auditory training. John Weigand provides fabulous leadership and community outreach in audiology at UHB and Stuart Motechin ably coordinates the busy Communicative Disorders Division at LICH, which recently added a full-time speech pathologist, Danielle Nascimento.

Pediatric Otolaryngology remains a highlight of the program with leadership by Ari Goldsmith, Nira Goldstein, and Paul Vastola, and additional contributions by Richard Rosenfeld, Mauro Ruffy, and voluntary faculty. Joshua Silverman joined the full-time faculty in February 2011 after dual fellowships in laryngology and pediatric otolaryngology.

Laryngology and neurolaryngology are well covered under the leadership of Boris Bentsianov, with substantial additional contributions from our pediatric otolaryngologists, head and neck surgeons, and voluntary faculty. Joshua Silverman has brought state-of-the-art training and techniques to managing complex voice and airway problems in both adults and children, greatly enhancing our ability to serve the community and train our residents.

General otolaryngology, allergy, and rhinology have expanded through the leadership of Marina Boruk who completed a rhinology fellowship, joined the department last year, and is pursuing advanced allergy training. Additional contributions come from Richard Westreich, Frank Lucente, and many of our superb voluntary faculty.

Research, Education, and Teaching

The past year has offered exciting new opportunities to expand and improve our already excellent research program, featuring 4 months of dedicated block time for resident research in the PGY-4 training year. Even a casual glance at the sections in this report on research and publications shows our ongoing commitment to research as a basis for enlightened patient care. Our annual Frank E. Lucente Alumni and Resident Research Day for 2011 was an unqualified success that featured keynote speakers Sonya Malekzadeh, Education Coordinator Elect for the AAO-HNS, and Dennis Lee, alumnus and fellowship-trained pediatric otolaryngologist.

We are fortunate to have Nira Goldstein continue as Director of Research, ably coordinating a rich palette of faculty, resident, and medical student projects. She has been an incredible resource for navigating the intricacies of funding, IRB approval, and statistical analysis,
resulting in superb resident presentations at national and international meetings. Joe McPhee retired in fall 2010 from his role as Basic Science Director, but we have compensated through relationships with Richard Kollmar, from the Department of Cellular Biology, and a budding relationship with David Wooten, Director of Mechanical Engineering at Cooper Union.

Our educational offerings to residents and medical students continue to expand, building on the incredible foundation laid by former chairman Frank Lucente, who is currently the Vice Dean for Graduate Medical Education at SUNY. Nicole Fraser, our educational coordinator, remains an invaluable resource as she completes here second year with the department. The flow of medical students has blossomed, as Director of Medical Student Education, Nira Goldstein, works to creatively integrate third year students, who can now choose otolaryngology as an elective, into our varied teaching services. We continue to embrace the philosophy of “residents as teachers” in our many interactions with medical students throughout their training.

Over the past year we have critically reviewed, enhanced, and revised our processes for resident training, program assessment, and faculty evaluation. We have worked hard to identify, and correct, issues that may detract from resident education, especially the challenging clinical demands of Kings County Hospital, which nonetheless present unparalleled training opportunities. As Associate Program Director, Jessica Lim has done a marvelous job of revamping our program to meet new duty hour requirements of the ACGME by implementing a LICH home night-call schedule and adjusting the resident complement at LICH and KCHC.

The Best and Getting Better

This past year the leadership at SUNY asked each department to create a list of “bests” worthy of highlighting. We identified eight “bests” in the otolaryngology department that deserve mention in this annual report.

The SUNY Downstate Department of Otolaryngology is the:

1. Largest center in the greater New York region for ear, nose, and throat care of children, with four full-time pediatric otolaryngologists covering all aspects of the subspecialty.
2. Only place in the greater New York region with a full-time tinnitus, who provides state-of-the-art management for patients suffering from tinnitus.
3. Only place in Brooklyn offering comprehensive pediatric airway reconstruction, including laser, endoscopic, open surgical, and balloon-assisted procedures.
4. Only place in Brooklyn where cochlear implants are performed to restore hearing in profoundly deaf individuals.
5. Only place in Brooklyn offering microvascular reconstruction of post-surgical defects in patients with head and neck cancer.
6. Only place in Brooklyn with minimally-invasive procedures for head and neck cancer, including transoral laser microsurgery and endoscopic skull base surgery.
7. Only place in Brooklyn with two full-time laryngologists, covering all aspects of adult and pediatric voice disorders.
8. Only place in Brooklyn with a fellowship-trained neurootologist capable of removing acoustic neuromas and invasive skull base tumors.

Additional events worthy of emphasis over the past year include:

- Joshua Silverman joined the full-time faculty
- Marina Boruk joined the full-time faculty
- Suite H opened at UHB with new equipment and more than double the space of Suite J
- The Third Annual Frank E. Lucente Alumni and Resident Research Day took place at LICH, featuring Sonya Malekzadeh and Dennis Lee
- The First Annual Head & Neck Symposium, focusing on thyroid surgery, was organized by Krishnamurthi Sundaram and Perminder Parmar, with keynote speaker Ashok Shaha
- The Gady Har-El Lectureship was established for future Head & Neck Symposia
- The ENT Legacy Fund was launched, with generous contributions from Mauro Ruffy, Dennis Lee, and Frank Lucente
- Nira Goldstein received the AAO-HNS Honor Award for Volunteer Service
- Jessica Lim received the Outstanding Faculty Award in Otolaryngology from the Residents and Fellows Alumni Association
- Boris Bentsianov received the Chief Resident’s Award for Outstanding Teaching and Support as full-time faculty member
• Gady Har-el received the Chief Resident’s Award for Outstanding Teaching and Support as a voluntary faculty member
• Danielle Nascimento joined as a full-time speech and language pathologist
• Michael Weiss began as Otolaryngology Service Chief at the Brooklyn VAMC
• Konstantin Tarashansky joined the voluntary faculty with coverage at the VAMC
• Tahl Colen joined the voluntary faculty after her fellowship in otology and neurotology
• Mauricio Miura from Porto Allegre, Brazil, completed a six-month post-doctoral research fellowship in otolaryngology
• Jan Evans from Auckland, New Zealand, completed a three-month clinical observership in otolaryngology

**New Faces and a Bright Future**

An update is also in order on our incoming and outgoing resident physicians. Gennaidiy Vengerovich will join the full-time faculty at Maimonides Medical Center and both Roni Keller and Haidy Marzouk will join leading private practices on Long Island, New York. We are delighted to welcome our three new PGY-1 residents, Sean Lewis from Boonshoft School of Medicine at Wright State University in Dayton, Ohio; Punam Thakkar from SUNY Downstate School of Medicine in Brooklyn, New York; and Jason Wasserman from Jefferson Medical College in Philadelphia, Pennsylvania.

This year was unique in that two of our residents decided to pursue career paths outside of otolaryngology: Vikram Saxena entered an anesthesia residency and Christina DiLoreto has embarked upon a career in pathology. We are absolutely thrilled with the replacements we were rapidly able to recruit, namely Marisa Earley who joined us as a PGY-2 resident from the University of Medicine and Dentistry of New Jersey and Niv Mor who joined us as a PGY-3 resident from Geisinger Medical Center in Danville, Pennsylvania.

Despite the many challenges of running a successful academic department in the current healthcare environment I enter the coming year with hope, confidence, and enthusiasm. How can our department not succeed, prosper, and grow when supported by the best and brightest? Many have already been acknowledged, but let me close by thanking two of our administrative miracle workers, Billy Tang at SUNY and Carole Facciponti at LICH. Their efforts, along with all of our other talented support staff, help fulfill our mission of research, teaching, and patient care to the benefit of our community and all stakeholders.

Respectfully submitted,

[Signature]

August 2011
Graduating Residents

Front Row L to R: Sherry Fishkin, MD, Resident; Roni Keller, MD, Graduating Resident; Gennadiy Vengerovich, MD, graduating resident; Richard M. Rosenfeld, MD, MPH, Professor and Chairman; Haidy Marzouk, MD, graduating resident; Marina Boruk, MD, Faculty; Krishnamurthi Sundaram, MD, Faculty

2nd Row L to R: Danielle Nascimento, MS, Speech-Language Pathologist; Christopher Mascarinas, MD, Resident; Richard Westreich, MD, Faculty; Anita Konka, MD, Resident;

3rd Row L to R: Jonathan Cohen, MD, Resident; Konstantin Tarashansky, MD, Faculty; Marika Fraser, MD, Resident; Miguel Mascaro, MD, Resident; Matthew B. Hanson, MD, Faculty; Boris Bentsianov, MD, Faculty; Joshua B. Silverman, MD, PhD, Faculty; Perminder Parmar, MD, Faculty; Gady Har-Ei, MD, Faculty; Frank E. Lucente, MD, Former Chairman; and Abraham Shulman, MD, Faculty

L to R: Haidy Marzouk, MD, Graduating Resident; Gennadiy Vengerovich, MD, graduating resident; Richard M. Rosenfeld, MD, MPH, Professor and Chairman; Roni Keller, MD, graduating resident
Table of Attending Staff for Educational Programs
FACULTY

The faculty of the Department of Otolaryngology is comprised of a variety of individuals whose clinical and research interests encompass the ever-increasing scope of this specialty. The department currently has thirteen full-time academic faculty, three full-time affiliate faculty, five part-time faculty, twenty-seven voluntary faculty and contributing physicians, four audiologists, one speech-language pathologist, and two PhD.

Full-Time Academic Faculty

Richard M. Rosenfeld, MD, MPH
Professor and Chairman of Otolaryngology at SUNY Downstate, editor-in-chief of Otolaryngology – Head and Neck Surgery, and president American Society of Pediatric Otolaryngology. Dr. Rosenfeld graduated the Otolaryngology Residency Program at Mount Sinai Medical Center and then completed a two-year fellowship in Pediatric Otolaryngology at Children’s Hospital of Pittsburgh with a Master’s Degree in Public Health. He received the SENTAC Robert Ruben Award for Excellence in Pediatric Otolaryngology, AAO-HNS Distinguished Service Award (twice), and AAO-HNS Honor Award. Dr. Rosenfeld was a guest examiner for the ABO and has chaired numerous national committees in the AAO-HNS and ASPO, including the Centralized Otolaryngology Research Effort and the AAO-HNS Guideline Development Task force. He is the author, coauthor, or editor of 5 books and over 240 scientific publications and textbook chapters, including chapters in “Bailey” and “Cummings” on understanding data and medical literature. Dr. Rosenfeld has given over 600 scientific presentations and is recognized as an international authority on guideline development, evidence-based medicine, and otitis media. He serves on the Board of Directors for the AAO-HNS, ASPO, Guidelines International Network, and the Auditory-Oral School of New York. Dr. Rosenfeld has been listed in the “Best Doctors in America” and in New York Magazine’s “Best Doctors in New York” since 1996.

Frank E. Lucente, MD
Professor and former Chairman. He is a graduate of Yale University School of Medicine and residency at Washington University. In 1984, he became Chairman of the Department of Otolaryngology at New York Medical College-New York Eye and Ear Infirmary and in 1990 he became Chairman at SUNY-Downstate and LICH. He was recently President of the Triological Society. He has been Vice President and Coordinator for Instruction Courses for the AAOHNSF. He has served as President of the SUO-HNS. He has been Guest of Honor for the American Broncho-Esophagological Association, American Laryngological Association and the American Society of Geriatric Otolaryngology. He is on the Executive Editorial Board of The Laryngoscope. He is the author, coauthor or editor of 15 books and 200 scientific publications and chapters. Dr. Lucente served on the ACGME RRC Otolaryngology and has been Chair of the AMA’s CME Advisory Committee. Dr. Lucente serves as Vice Dean for Graduate Medical Education for SUNY-HSCB. He has also received the SUNY Chancellor’s Award for Distinction in Teaching and in 2001, was honored with the Teacher of the Decade Award from the Department of Otolaryngology. In 2008 he received the Graymoor Award from the Franciscan Friars of the Atonement for his service to that organization.

Krishnamurthi Sundaram, MD
Dr. Sundaram is a graduate of the Otolaryngology Residency Program of State University of New York-Health Science Center at Brooklyn and is Clinical Professor of Otolaryngology. After completion of medical school he did a two year fellowship in surgical oncology at the Cancer Institute, Chennai, India. Prior to starting his Otolaryngology residency he completed a straight surgical internship at Church Hospital Corp.[Affiliate of Johns Hopkins University] in Baltimore, MD, and 3 years of residency in General Surgery at The Methodist Hospital of Brooklyn. After residency he was a junior attending/fellow/residency coordinator in the department of Otolaryngology at SUNY Downstate Medical Center. Subsequently he served as Chief, Division of Otolaryngology at the Methodist Hospital and Chief of Otolaryngology at the
Brooklyn Hospital Center. After 1992, he has been actively involved with the residency program at SUNY Downstate Medical Center. His areas of interest include head and neck oncology, thyroid, parathyroid, sinuses, larynx and trachea.

Dr. Sundaram is Vice-Chairman of the Department of Otolaryngology and Chief of Head and Neck and Skull-Base surgery at Long Island College Hospital of Brooklyn. He supervises the head and neck clinic and represents the department on the Cancer Committee at Long Island College Hospital. He is a member of the Clinical leadership team of The Othmer Cancer Center at The Long Island College Hospital of Brooklyn.

**Boris Bentsianov, MD**

Dr. Bentsianov completed his medical school training at Downstate Medical Center. He continued his clinical training at Downstate Medical Center/ Long Island College Hospital as an intern in General Surgery followed by a residency and chief residency in Otolaryngology-Head and Neck Surgery. He then went on to do a fellowship in Laryngology and Neurolaryngology at Columbia University/St Lukes-Roosevelt Hospital-New York Center for Voice and Swallowing Disorders. After becoming a diplomate of the American Board of Otolaryngology-Head and Neck Surgery he rejoined the faculty of SUNY Downstate in June 2003 as assistant professor in the Department of Otolaryngology and Director of the Division of Laryngology, Voice and Swallowing Disorders. Dr. Bentsianov’s clinical interests are centered on the evaluation and treatment of disorders of the larynx by various endoscopic, stroboscopic and electromyographic techniques, as well as laryngeal framework surgery. His research interests include neurologic disorders of the larynx, diagnosis and treatment of dysphagia and swallowing disorders, and development of a voice laboratory and professional voice center. Under his leadership the division of Laryngology has made great strides in recent years with the addition of full time faculty including a pediatric and laryngology trained physician and a speech and language pathologist with specialty training in head and neck and voice disorders.

**Marina Boruk, MD**

Dr. Boruk, Assistant Professor of Otolaryngology, joined the Department at the State University of New York – Downstate Medical Center in July of 2010. Dr. Boruk is a graduate of the College of Medicine at State University of New York Downstate Medical Center, Brooklyn, where she also completed her residency in Otolaryngology – Head and Neck Surgery. She continued her training with an American Rhinologic Society accredited fellowship in Rhinology and Skull Base Surgery at Vanderbilt University in Nashville, Tennessee, under the direction of Dr. James Duncavage. Dr. Boruk’s clinical interests are in the medical and surgical management of the nose and paranasal sinuses. Her expertise includes both minimally invasive and traditional surgery of the nasal cavity and sinuses, as well as skull-based tumors. Dr. Boruk also has additional training in the field of allergy.

**Sydney Butts, MD**

Dr. Butts serves as the Chief of the Division of Facial Plastic and Reconstructive Surgery at University Hospital Brooklyn/SUNY Downstate and Kings County Hospital Center.

After graduating from the Yale University School of Medicine, Dr. Butts completed a residency in otolaryngology at the Albert Einstein College of Medicine/Montefiore Medical Center. Dr. Butts then completed fellowship training in facial plastic and reconstructive surgery at SUNY Upstate Medical University in Syracuse, receiving training in a diverse spectrum of reconstructive cases. She then joined the faculty of the department of otolaryngology at SUNY Upstate. Dr. Butts has clinical expertise in congenital craniofacial surgery including cleft lip and palate surgery and craniosynostosis surgery. As a member of the cleft and craniofacial team at SUNY Upstate, she participated in many of these challenging cases as well as in research projects on craniofacial growth and development.

Dr. Butts’ clinical focus includes the management of congenital craniofacial anomalies, adult and pediatric maxillofacial trauma, vascular malformations, local/regional flap surgery, scar revision surgery, rhinoplasty and the management of other soft tissue lesions that require a reconstructive approach. She has written several book chapters and journal articles, presented...
research at national academic meetings, and been a guest faculty and invited lecturer on multiple reconstructive topics. She is Board certified in otolaryngology and is a diplomate of the American Board of Facial Plastic and Reconstructive Surgery.

Ari Goldsmith, MD
Dr. Goldsmith, Associate Professor, joined the Department of Otolaryngology in 1994. He did his otolaryngology residency at Long Island Jewish-Hillside Medical Center and completed a fellowship in Pediatric Otolaryngology at the Children’s Hospital of Boston and the Harvard Medical School, under the direction of Gerald Healy, MD. Dr. Goldsmith is board certified and has authored many articles and chapters on various topics of otolaryngology, and presented at many national and international conferences. He is a Fellow of the American Academy of Pediatrics and a member of the American Society of Pediatric Otolaryngology. His research interests include acquired diseases of the pediatric larynx and upper airway reflux in children, and his clinical areas include pediatric bronchoesophagy, pediatric otology, upper airway reflux in children, and pediatric head and neck surgery.

Nira A. Goldstein, MD, MPH
Dr. Goldstein, Associate Professor of Otolaryngology, joined the Department of Otolaryngology in 1998, as the third full-time pediatric otolaryngologist in the division. She is a graduate of the New York University School of Medicine and the Otolaryngology Residency Program at the New York University Medical Center. Dr. Goldstein completed her fellowship in Pediatric Otolaryngology at the Children’s Hospital of Pittsburgh where she also served as the Hamburg Research Fellow. She was an instructor at the University of Pittsburgh School of Medicine as well as staff physician at the Children’s Hospital of Pittsburgh. She received her Master of Public Health degree at SUNY Downstate in May 2010. Dr. Goldstein has authored over 30 articles on various topics in otolaryngology and has presented at numerous national and international conferences. Her clinical and research interests include pediatric obstructive sleep apnea, otitis media, and sinusitis.

Matthew Hanson, MD
Dr. Matthew Hanson, Assistant Professor and Chief of Otology and Neurotology and Director of the Otolaryngology Service at KCHC. He has been involved in hearing disorders his whole life. Both of his paternal grandparents were congenitally deaf and he has over thirty deaf relatives. His father, equally fluent in American Sign and English, served as Director of Deaf Services for Vocational Rehabilitation for the State of Iowa for more than 35 years. Dr. Hanson attended medical school at the University of Iowa where he had the opportunity to do research in the early field of cochlear implantation. He went onto residency in Otolaryngology Head and Neck Surgery at Columbia University. After completion of his residency, he was on staff at Manhattan Eye, Ear and Throat Hospital for two years before completing a fellowship in Otolgy/Neurotology at The EAR Foundation/Otology Group in Nashville, Tennessee. Before coming to Downstate in 2005, he had been Director of Otology and Neurotology at Temple University School of Medicine in Philadelphia. Dr. Hanson continues to have active clinical and research interests in all aspects of Otology and Neurotology. This includes disorders of balance, disorders of the facial nerve, skull base disease (including treatment of acoustic neuroma) and of course, disorders of hearing and cochlear implantation. In 2009, he was granted subspecialty certification in Neurotology by the American Board of Otolaryngology and is the only full-time practitioner so certified in Brooklyn.

Perminder Parmar, MD
Dr. Parmar is an Assistant Professor in the Department of Otolaryngology and serves as Chief of the Division of Head and Neck Surgery for SUNY/Downstate Medical Center and University Hospital of Brooklyn. His special expertise and primary interest is in the surgical treatment of benign and malignant tumors in the head and neck, including tumors of the thyroid gland, parathyroid gland, salivary glands, oral cavity, larynx, and head and neck
skin cancer. As a surgeon actively involved in the care of patients with head and neck cancer, he has extensive experience in surgery and an in-depth understanding of each of the disciplines involved in the treatment of head and neck cancer. His philosophy to treat the whole patient, not just the cancer, serves as the basis for his approach.

Dr. Parmar is a graduate of the Mount Sinai School of Medicine and the Otolaryngology Residency Program at the New York Eye and Ear Infirmary. He completed an Advanced Training Council fellowship in Head and Neck Surgical Oncology at the University of Toronto under the direction of Drs. Patrick Gullane and Jeremy Freeman. He is board-certified in otolaryngology, is a diplomate of the American Academy of Otolaryngology – Head and Neck Surgery, and a fellow of the American Head and Neck Society.

Abraham Shulman, MD

Dr. Shulman, Prof. Emeritus Clinical Otolaryngology, SUNY/Downstate, is a graduate of the Kings County Hospital Center, Division of Otolaryngology – Residency Training Program. Following graduation, he completed a Fellowship with Julius Lempert at the Lempert Foundation and served as Lieutenant Commander in the USNR as Chief of Otolaryngology at the Portsmouth Naval Hospital. His training has been in all aspects of otolaryngology with particular emphasis since 1969 in otology-neurotology. He was recruited to serve as Acting Director of the Division of Otolaryngology in 1975. His efforts as Acting Director (1975-1980; 1990-1991) and Director (1980-1985) of the Division of Otolaryngology and the Center for Communicative Sciences at the Health Science Center at Brooklyn contributed to the establishment of the Department of Otolaryngology in 1990. Dr. Shulman’s clinical interests are hearing loss, tinnitus, and vertigo. Symposia, articles and courses and a recent text have identified Dr. Shulman as an international figure for the symptom of tinnitus. In 2010 SUNY/Downstate Medical Center included him in a celebration of achievement of 150 years of medical education in Brooklyn; and the AAO-HNS designated its first named miniseminar the Martha Entenmann Tinnitus Research Center, Inc, Abraham Shulman, M.D., Barbara Goldstein PhD, International Tinnitus Miniseminar, 2010 -2014. His research interests include sensorineural hearing loss, electrical and ultrahigh frequency acoustical stimulation of the cochleovestibular system, vestibular evoked response, mechanisms of tinnitus production, nuclear medicine imaging of brain in tinnitus patients, and drug development for tinnitus relief for clinical types of tinnitus.

Joshua Silverman, PhD, MD

Dr. Silverman, Assistant Professor of Otolaryngology at SUNY Downstate and Director of Pediatric Otolaryngology at Kings County Hospital Center, joined the faculty of SUNY Downstate in February 2011. After graduating from New York University School of Medicine with both a medical degree and a doctorate in Physiology and Neuroscience, Dr. Silverman completed the Harvard University Otolaryngology Residency Program. He then completed two clinical fellowships: first in Pediatric Otolaryngology at Children’s Memorial Hospital, Northwestern University, under the supervision of Dr. Lauren Holinger; followed by a Laryngology & Voice Fellowship at Massachusetts Eye and Ear Infirmary, Harvard University, training with Dr. Ramon Franco. Dr. Silverman has extensive training and clinical expertise in both pediatric and adult airway management as well as voice disorders. In addition, his research background has uniquely prepared him for a career as a clinician scientist in Otolaryngology. Research interests include nerve regeneration, vocal fold immobility, and translation of basic science findings to the clinical arena. His clinical areas of interest include pediatric and adult laryngology; bronchoesophagology; voice and swallowing problems; treatment of pediatric head and neck masses; vascular malformations; and pediatric obstructive sleep apnea. He has authored manuscripts for both clinical and basic science journals, as well as several book chapters, and he is certified by the American Board of Otolaryngology.
Richard Westreich, MD

Dr. Westreich, the Director of Facial Plastic and Reconstructive Surgery at L.I.C.H., received his medical degree with honors in cell biology research from New York University School of Medicine. He went on to complete both a residency in otolaryngology and a fellowship in facial plastic surgery at Mount Sinai Hospital. His society affiliations include the American Academy of Otolaryngology, the American Academy of Facial Plastic Surgery, the American College of Surgeons, and the New York Facial Plastic Surgery Society. Dr. Westreich is an active researcher and is currently studying nasal tip support models and facial asymmetry as it relates to nasal deviation. His past investigations include nasal tip cartilage biomechanical properties, the effects of fibrin glue and FGF on cartilage grafts, and injectable cartilage engineering models. Dr. Westreich has published numerous clinical papers on sinonasal disorders, functional nasal surgery, rhinoplasty techniques, and methods for correcting the deviated nose. Dr. Westreich also serves as a reviewer for the American Journal of Rhinology and is a member of several AAFPRS committees (Young Physician’s, Technology, and Fellowship Compendium). Dr. Westreich will continue to further expand the division, provide resident teaching and manage patients with various forms of facial trauma requiring soft tissue or bone reconstruction. He also will be performing facial cosmetic surgery and related procedures.

Full-Time Affiliate Faculty

Victor Lagmay, MD FACS

Dr. Lagmay completed his general surgery and otolaryngology residencies at New York University Medical Center. He is fellowship-trained in Head & Neck Surgery at the Beth Israel Medical Center Institute for Head and Neck Cancer in New York.

He is currently the division director for Head & Neck Cancer Surgery at the Maimonides Comprehensive Cancer Center in Brooklyn. He is the clinical director of the Endoscopic Dysphagia Service at Maimonides Medical Center.

Dr. Lagmay maintains memberships in several professional societies, including The American Thyroid Association; The Triologic Society; The American Academy of Otolaryngology - Head and Neck Surgery; and The New York Head and Neck Society.

Dr. Lagmay is board-certified in his specialty and is a Fellow of the American College of Surgeons.

A. Paul Vastola MD

Dr. Vastola, Clinical Assistant Professor, received his Otolaryngology training at Manhattan Eye, Ear and Throat Hospital. He received his fellowship training in Pediatric Otolaryngology at Baylor University School of Medicine and Texas Children’s Hospital in Houston, Texas. His clinical interests include pediatric airway reconstruction, pediatric sinonasal disease and cholesteatoma in the pediatric population. Dr. Vastola’s research interests include the pathophysiology of pediatric sinusitis and investigation of the growth of hemangiomas. He currently is the Director of Pediatric Otolaryngology at Maimonides Medical Center and Clinical Assistant Professor of Otolaryngology at SUNY Downstate.

Michael Weiss, MD

Dr. Weiss, Clinical Professor of Otolaryngology, graduated from the Albert Einstein College of Medicine and trained in Otolaryngology at New York University Medical Center. His particular area of clinical interest is head and neck surgery. Research interests include head and neck oncology, quality of life and outcomes analysis. He is the Director of Otolaryngology at Maimonides Medical Center. He has recently become the Chief of Otolaryngology at the Brooklyn VA Medical Center.
Part-Time Faculty

Jessica W. Lim, MD

Dr. Lim, Assistant Professor of Otolaryngology, is the residency training director. She completed her otolaryngology training at New York University Medical Center, followed by a fellowship in head and neck/sinus surgery with Michael Friedman, MD, at Rush-St. Luke’s-Presbyterian Medical Center in Chicago. Dr. Lim is a graduate of West Virginia University School of Medicine. Her clinical interests include head and neck cancer, sinus disease, and disorders of voice and swallowing. Current research projects focus on thyroid surgery, cultural awareness and patient satisfaction and decision-making.

Gady Har-El, MD

Gady Har-El, M.D. is a Professor of Otolaryngology and Clinical Neurosurgery at SUNY-Downstate. He is the Chairman of the Department of Otolaryngology – Head and Neck Surgery at Lenox Hill Hospital. His clinical interests include head and neck cancer, minimally invasive skull base surgery and sinus surgery. Dr. Har-El has authored and co-authored more than 260 scientific publications and book chapters and gave 400 presentations, lectures and courses. Dr. Har-El served as the President of the Broncho-Esophagological Association, the New York Head and Neck Society, and the New York Laryngological Society. In 2010, Dr. Har-El was honored as the Guest of Honor of the American Triological Society. Also, he received the Stanley M. Blaugrund Award for Excellent Teaching from New York University, for the second consecutive year. He has been listed in the “Best Doctors in America” and “Best Doctors in New York” for 17 consecutive years (1994-2022). Dr. Har-El recently published a two volume set “Head and Neck Surgery” which he co-edited. He is currently working on a five volume textbook on Otolaryngology – Head and Neck Surgery to be published by Thieme. In 2011, Dr. Har-El was elected to the Council of the American Laryngological Association. Also in 2011, he received the Graduating Residents’ Award for “Outstanding Teaching and Support” from the Department of Otolaryngology, SUNY-Downstate Medical Center.

Mauro Ruffy, MD

Dr. Ruffy is a graduate of the University of Santo Tomas, Manila, Philippines, and completed his residency training at Long Island College Hospital in 1972. His field of expertise is in general otolaryngology with special emphasis in otology. He is the Medical Director of the Bureau of Families with Special Needs Program at Long Island College Hospital, in which children with otologic problems are evaluated and treated. His clinical experience has made him a major contributor to our training program.

Neil M. Sperling, MD

Dr. Sperling is Associate Professor and previous director of the Division of Otology in the Department of Otolaryngology. After completing his medical education at New York Medical College and Residency training at the New York Eye and Ear Infirmary, Dr. Sperling completed fellowship training in otologic research and surgery in Minneapolis with Dr. Michael Paparella at the Minnesota Ear, Head and Neck Clinic and the University of Minnesota. In concert with the Division of Communicative Disorders at LICH, educational programs in hearing science and ear disease diagnosis and management have been developed. This includes the development of a Cochlear Implant and implantable hearing devices program. Dr. Sperling is also involved with recent advances in intra-tympanic treatment of inner ear disease. Dr. Sperling’s special clinical and research interests include otosclerosis, immune-mediated hearing loss, and tympanic membrane retraction.
Afshin Parhiscar, MD

Dr. Afshin Parhiscar is a Board Certified Plastic Surgeon specializing in aesthetic surgery. He is the Director of Plastic Surgery at Long Island College Hospital and Assistant Professor of Plastic Surgery and Otolaryngology at State University of New York-Health Science Center at Brooklyn. Dr. Parhiscar attended medical school at the University of Pittsburgh, School of Medicine. He graduated with honors and received the Kenneth H. Hinderer M.D. Memorial Award. He then completed his surgical internship, and an otolaryngology and plastic surgery residency at State University of New York-Health Science Center at Brooklyn where he was awarded the Inchul Song M.D. Award. Dr. Parhiscar is board certified by both the American Board of Plastic Surgery and the American Board of Otolaryngology-Head and Neck Surgery. Dr. Parhiscar’s research interests include techniques in revision rhinoplasty, advances in breast surgery and head and neck reconstruction.
Volunteer Faculty And Other Contributing Physicians

The Volunteer Clinical Staff consists of numerous otolaryngologists and other physicians in the New York Metropolitan area who participate in the educational programs of the department and have a major role in both resident and medical student teaching and in numerous clinical and administrative activities. Among the activities in which they are involved are the following: teaching in the operating rooms and clinics staffed by the department at University Hospital of Brooklyn at Long Island College Hospital, the University Hospital of Brooklyn, Kings County Hospital Center, the Brooklyn Veterans Administration Medical Center, and Maimonides Hospital; active participation in Grand Rounds and other weekly educational conferences at University Hospital of Brooklyn at Long Island College Hospital; attendance at the quarterly meetings of the Otolaryngology Section of the Kings County Medical Society; training residents in their office practices; cooperation in scientific studies and publications; support of departmental research and education projects by contributing to the periodic social and fund-raising activities of the foundation; and participation in various important committee and medical board activities at the hospitals involved in our program. The rapid growth and development of the department continues to offer more opportunities for involvement in these activities.

It is with tremendous gratitude that the department acknowledges the contributions of the following members of the voluntary clinical staff and consultants who have contributed their time, talents, and resources in support of our program.

Voluntary Faculty and Other Contributing Physicians

Mark Carney, MD

Dr. Mark Carney received his medical degree from the State University of New York Health Science Center in Syracuse in 1989. He completed his General Surgery internship and Otolaryngology residency at Thomas Jefferson University Hospital in Philadelphia. He went on to work at Mt Sinai Medical Center in Miami Beach FL and served as a Clinical Instructor at the University of Miami. He has worked at LICH since 2006.

Dr. Carney is Board Certified in Otolaryngology. He is a member of the American Academy of Otolaryngology-Head and Neck Surgery. He has special interest in Endoscopic Sinus surgery, voice problems, and Head and neck cancer surgery. He is the current vice president of the Richmond County Medical Society.

Rashid Chaudhry, MD

Dr. Chaudhry received his M.D. degree from University of Punjab, Nishtar Medical College, Multan, Pakistan in 1969. He is a graduate of the Otolaryngology-Head and Neck Surgery Residency Program at State University of New York Health Science Center at Brooklyn in 1978. Following graduation, he joined the faculty as Instructor and then was promoted to Clinical Assistant Professor. Since 1980 he has been Chief of Otolaryngology at Brookdale Hospital Medical Center, Brooklyn, New York. His clinical interests include head and neck, facial plastic surgery and rhinomanometry.

Shawn C. Ciecko, MD

Dr. Ciecko is currently an associate at ENT and Allergy Associates LLP in Staten Island, NY and Clinical Instructor at SUNY Downstate/Long Island College Hospital. He completed both internship in General Surgery and residency in Otolaryngology Head and Neck Surgery at the Duke University Medical Center. Dr. Ciecko spent two years as Duke’s chief resident in Otolaryngology Head & Neck Surgery. He has received several honors in his career including Duke Hospital’s consultant of the year in 2006. He was elected to the Alpha Omega Alpha National Medical Honor Society and is currently a member of the American Academy of Otolaryngology Head & Neck Surgery and American College of Surgeons.

Dr Ciecko’s interests are in both adult and pediatric ENT, advanced endoscopic sinus surgery, head and neck cancer surgery, thyroid and parathyroid surgery and obstructive sleep
Christopher de Souza, MD
Dr. de Souza has been Visiting Assistant Professor in the department since 1997. He is an experienced otolaryngologist who focuses on otologic disorders. He is a consultant otolaryngologist and skull base surgeon at Tata Memorial Hospital in Bombay (Mumbai) India. After training in India he completed a fellowship with Michael Paparella MD in Minneapolis, where he met Neil Sperling, MD. The two have continued their collaboration since that time. He has been a very productive contributor to the otolaryngology literature with over 30 papers in various aspects of otology and skull base surgery. He has published “Atlas of Otitis Media Clinicopathologic Correlations and Operative Techniques” with Drs. Michael Paparella and Neil Sperling as co-authors. His previous books included texts in otolaryngology, pediatric otolaryngology, head and neck surgery, and an atlas of otitis media. He has done fellowships with Michael Glasscoock and C Gary Jackson in 1994 in lateral skull base surgery. He has done a minifellowship on endoscopic sinus surgery with David Kennedy in 1996. He has completed a course on lateral skull base surgery with Mario Sanna in Piacenza, Italy in 2001. He is the Editor-in-Chief of the hugely successful 2 volume book, Head and Neck Surgery that was published by Jaypee Medical Publishers, India. It now goes into a second edition. He has also edited “Rhinologic and Facial Plastic Surgery” published by Springer Verlag Germany. He is the Editor-in-Chief of the Journal, “International Journal of Head and Neck Surgery”. He is on the editorial board of the American Journal of Rhinology. He contributes to the department during his visits to New York and by involving other faculty members in his publications.

Ramez Habib, MD FACS
Dr. Habib graduated from Mount Sinai School of Medicine in 1999, and subsequently completed his otolaryngology residency training from SUNY Downstate in 2004. Upon completion of his residency training, he immediately joined his father, Mohsen Habib, MD in practice in Brooklyn. He currently practices with two other recent Downstate graduates, Christopher Song, MD and Francisca Yao, MD in both Bay Ridge and Park Slope.

Richard Kollmar, PhD
Dr. Kollmar earned his Diploma in Chemistry at the Julius-Maximilians-Universität Würzburg, the Ludwig-Maximilians-Universität München, and the Max-Planck-Institut for Biochemistry in Martinsried. He earned his Ph.D. in Cell and Molecular Biology at the University of Wisconsin-Madison. His postdoctoral training in sensory neuroscience was with Dr. A. J. Hudspeth at the University of Texas Southwestern Medical Center at Dallas and at Rockefeller University in New York. After a stint as Assistant Professor of Molecular and Integrative Physiology at the University of Illinois at Urbana-Champaign, he returned to New York and joined SUNY Downstate Medical Center, where he is a Visiting Associate Professor of Cell Biology and an Assistant Professor of Otolaryngology. His primary research focus is to understand the mechanisms that underlie the development and maintenance of otooliths and otoconia, from the molecular to the organismal level. His group has identified several novel otoith proteins that are implicated in extracellular-matrix formation. He is now investigating the function of these proteins both in vivo, using the zebrafish as an animal model, and in vitro. Dr. Kollmar also teaches the ear lectures for CHRP students and first-year medical students during their neuroanatomy block and provides research opportunities in his laboratory for high-school students and residents.

Vishvesh Mehta, MD
Dr. Mehta, Clinical Assistant Professor of Otolaryngology, is a graduate of the Medical School and Otolaryngology Residency Program at SUNY Health Science Center at Brooklyn. Dr. Mehta has served as attending physician and held several academic appointments at Jamaica Hospital Medical Center, Flushing Hospital Medical Center, Kings County Hospital Medical Center and Brookdale University Hospital where he received the Outstanding Teaching
Award (Department of Surgery) in 2010. Dr. Mehta is board certified by the American Board of Otolaryngology, and is a member of the American Academy of Otolaryngology and Neck Surgery (AAO-HNS). He is in private practice with ENT and Allergy Associates, with offices in Edison and Old Bridge, New Jersey. He currently serves as an attending physician at JFK Medical Center, and Raritan Bay Medical Center.

**Bhuvanesh Singh, MD**

Dr. Singh graduated from the Medical School and Otolaryngology Residency Program at SUNY Health Science Center at Brooklyn and completed a fellowship in Head and Neck Surgery at Memorial Sloan-Kettering Cancer Center. He has also completed a PhD at the University of Amsterdam. He is currently an Associate Attending in the Head and Neck Service at Memorial Sloan-Kettering Cancer Center and an Associate Professor of Otolaryngology at Weil Medical College of Cornell University. Dr. Singh, a board certified otolaryngologist, has received several research awards and has authored over 175 articles on head and neck surgery. He is also a co-author of a textbook in head and neck surgery. In addition to running an active clinical practice, Dr. Singh is involved in basic research. He is the Director of the Laboratory of Epithelial Cancer Biology and his work focus on defining the basic mechanisms that underlie the pathogenesis of head and neck cancer.

**Abraham Sinnreich, MD**

Dr. Abraham Sinnreich received an MS degree from Columbia University’s College of Physicians and Surgeons and an MD degree from the Albert Einstein College of Medicine. After an internship at Coney Island and Maimonides Hospitals, he completed his residency training at the Mt. Sinai Hospital’s Department of Otolaryngology in New York City in general ear nose and throat, head and neck surgery and facial reconstructive surgery.

Dr. Sinnreich is board certified in his specialty and was a Fellow of the American College of Surgeons. Dr. Sinnreich is a faculty member at the SUNY-Downstate School of Medicine. He participates in the teaching of resident doctors from Long Island College Hospital - Downstate Medical Center. Castle Connolly has named Dr. Sinnreich as one of the “Top doc’s in the Metropolitan Area” yearly since 1999. New York Magazine chose Dr. Sinnreich to be “One of the Best Doctors in New York” for 2002! Although he is a general Otolaryngologist seeing children and adults, Dr. Sinnreich’s special interests are in the treatment of sleep and sinus disorders. He is the first otolaryngologist to perform the new balloon sinuplasty on select sinusitis patients in Brooklyn and Staten Island.

**Additional Voluntary Faculty Who Contribute To The Department**

<table>
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<tr>
<th>Daniel Arick, MD</th>
<th>Stephen Finger, MD</th>
<th>Steven Kushnick, MD</th>
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<td>Jeffrey H Arroesty, MD</td>
<td>Douglas Finn, MD</td>
<td>Anthony J. Sarro, MD</td>
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<td>Howard Brownstein, MD</td>
<td>Sheldon Palgon, MD</td>
<td>Prashant B. Shah, MD</td>
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<td>Tahl Colen, MD</td>
<td>Alden Pearl, MD</td>
<td>Konstantin Tarashansky, MD</td>
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<td>Maurice Cohen, MD</td>
<td>Manoj Kantu, MD</td>
<td>Jeffrey M. Taffett, MD</td>
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<td>John Dodaro, MD</td>
<td>Sanjay Kantu, MD</td>
<td>Stanley Wien, MD</td>
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<tr>
<td>Mark Erlich, MD</td>
<td>Kanhaiyalal Kantu, MD</td>
<td>Melvin Wiederkehr, MD</td>
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Professional Society Membership

Richard M. Rosenfeld, MD, MPH
American Medical Association (AMA), 1985-
American Academy of Otolaryngology-Head & Neck Surgery (AAO-HNS), 1987-
American Academy of Pediatrics (AAP), 1992-
American Society of Pediatric Otolaryngology (ASPO), Fellow, 1995-
American Bronchoesophagological Association (ABEA), 1999-
AAO-HNS Board of Directors, 2005-
AAO-HNS Guideline Development Task Force, 2006-
AAO-HNS Educational Advisory Committee, 2006-
AAO-HNS Science and Education Committee, 2008-
AAO-HNS Journal Editor, 2006-
AAO-HNS Advisory Council on Quality, 2011-
ASPO Finance Committee, Chair, 2005-2010
ASPO Ad Hoc Subcertification Committee, Chair, 2008-
AMA Physician Consortium for Performance Improvement, 2006-
Editor, Cochrane Collaboration ENT Section, 2008-
Kings County Medical Society, 1992-
Brooklyn Pediatric Society, 1992-
Society of University Otolaryngologists, 1994-
Triological Society, 2003-
American Otological Society, 2004-

Frank E. Lucente, MD
Fellow, American Academy of Otolaryngology - Head and Neck Surgery
Fellow and Past President, American Laryngological, Rhinological and Otological (Triological) Society
Fellow, American Laryngological Association
Fellow, American College of Surgeons
Fellow, American Society for Head and Neck Surgery
Life Fellow, New York Academy of Medicine
Kings County Medical Society
Society of University Otolaryngologists
Alpha Omega Alpha
New York Laryngological Society
New York Head and Neck Society
Louisiana-Mississippi Ophthalmological and Otolaryngological Society (Honorary membership)

Krishnamurthi Sundaram, MD
Kings County Medical Society
New York State Medical Society
New York Head and Neck Society
Fellow, American Rhinologic Society
Fellow, The American Academy of Otolaryngology-Head and Neck Surgery
Associate Member, American Society of Laser Medicine and Surgery
Fellow, American College of Surgeons
Member, American Head and Neck Society
Fellow, The Triologic Society
Member, American Association of Clinical Endocrinologists
American Medical Association
Member, North American Skull Base society
Member, American Thyroid Association
Member, Society of Robotic Surgeons
Boris Bentsianov, MD
American Medical Association, 1994-
Downstate Alumni Association, 1997-
Associate Member, American College of Physicians, 1999
American Academy of Otolaryngology, 1999

Marina Boruk, MD
American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS), 2002-
American Academy of Otolaryngic Allergy (AAOA), 2007-

Sydney Butts, MD
American Academy of Otolaryngology-Head and Neck Surgery, 2001-present
- Women in Otolaryngology Section
- Board of Governors, Legislative liaison to the Women in Otolaryngology Section
American Cleft Palate-Craniofacial Association, 2003-present
- Membership Committee
American Academy of Facial Plastic and Reconstructive Surgery, 2001-present
- Face to Face Committee
- Specialty Surgery Committee
- Women in Facial Plastic Surgery Committee, Committee Chair 2010-12
AO/Association for the Study of Internal Fixation, 2008-present
- Craniomaxillofacial Faculty
Kings County ENT Society
- Treasurer/Secretary
Brooklyn Pediatric Society, 2011-

Shawn C. Ciecko, MD
American Academy of Otolaryngology Head & Neck Surgery
American College of Surgeons
Richmond County Medical Society
Medical Society State of New York

Christopher de Souza, MD
American Academy of Otolaryngology - Head and Neck Surgery
American Neurotological Society – Fellow
American College of Surgeons – Fellow

Ari Goldsmith, MD
American Academy of Otolaryngology - Head and Neck Surgery, 1994
American Academy of Pediatrics, 1995
American College of Surgeons, 1995
American Board of Otolaryngology, 1994
Society of Ear, Nose and Throat Advances in Children
New York City Pediatric ENT Society
Kings County Otolaryngology Society
Society of University Otolaryngologists-Head and Neck Surgeons
American Society of Pediatric Otolaryngology 2010
Long Island Pediatric Society

Nira Goldstein, MD, MPH
American Academy of Otolaryngology - Head and Neck Surgery
American Academy of Pediatrics
American Medical Association
Brooklyn Pediatric Society
American Society of Pediatric Otolaryngology
Ramez Habib, MD
American Medical Association
Academy of Otolaryngology – Head and Neck Surgery
Fellow American College of Surgeons
Egyptian American Medical Society

Matthew Hanson, MD
American Academy of Otolaryngology – Head and Neck Surgery
Member, 1991 -
Elected Fellow, 1997 -
Fellow, American Neurotologic Society, 2002-Present
Fellow, North American Skull-base Society, 2004-Present
Member, New York Otologic Society, 2007-Present
Member, Medical Society of the State of New York
Member, William House Cochlear Implant Study Group
Member, Facial Nerve Disorders Study Group

Gady Har-El, MD
American Medical Association, 1991-
Kings County Medical Society, Otolaryngology Section, 1991-
New York Head and Neck Society, 1992-
American College of Surgeons (Associate Fellow), 1992; Fellow, 1994-
The Society of Head and Neck Surgeons, 1993-
North American Skull Base Society, 1994-
Society of University Otolaryngologists, 1994-
Medical Society of the State of New York, 1994-
New York Laryngological Society, 1995-
American Rhinologic Society, Member, 1993; Fellow, 1995
American Laryngological Association, 1997-
The American Broncho-Esophagological Association, 1998-
American Society for Head and Neck Surgery, 1996-
American Laryngological, Rhinological and Otological Society (The Triological Society), 1997-

Victor Lagmay, MD
American Academy of Otolaryngology - Head and Neck Surgery
New York Head and Neck Society
American College of Surgeons - Fellow

Jessica W. Lim, MD
AAO-HNS
New York Head and Neck Society
American Rhinologic Society

Richard Kollmar, PhD
Society for Neuroscience
Association for Research in Otolaryngology

Perminder S. Parmar, MD
American Academy of Otolaryngology-Head and Neck Surgery
American Head and Neck Society
Abraham Shulman, MD
Harvey Society Fellow, 1999–
American College of Forensic Examiners - Diplomate -8/29/96
American Board of Forensic Medicine -Diplomate - 12/31/96
American Academy of Ophthalmology & Otolaryngology - Fellow 1962
American College of Surgeons - Fellow 1974
International College of Surgeons - Fellow
American Neurotology Society - Fellow 1974
American Audiology Society – Fellow
International Electrical Response Audiometry Study Group - Member
American Society of Ophthalmologic and Otolarynoglogic Allergy - Fellow
Association of Military Surgeons - Fellow
American Society of Facial Plastic Surgery - Fellow
American Medical Association - Queens County Medical Society; Society for Cryosurgery - Fellow
Pan American Association of Otorrhinolaryngology and Bronchoesphagology
Centurion Club Member
American Council of Otolaryngology - Member
American Society of Contemporary Medicine and Surgery, 1971-
New York Academy of Science
American Neurotology Society
Society of University Otolaryngologists
Brooklyn Oncology Society
Society of Sigma XI - Downstate Medical Center Chapter
Association for Research in Otolaryngology
Adam Politzer Society - Fellow – 1984

Joshua Silverman, MD, PhD
American Medical Association (AMA), 1996-
American Academy of Otolaryngology-Head & Neck Surgery (AAO-HNS), 2005-
American College of Surgeons (ACS), 2006-

Neil Sperling, MD
American Academy of Otolaryngology – Head and Neck Surgery, 1986-
Medical Society of the State of New York, 1992-
American Neurotology Society, 1995-, elected to fellow 2001
American College of Surgeons, 1995
New York Otolologic Society, 1996-
Alpha Omega Alpha Honor Society, 1985-
Committee on Applicants, American College of Surgeons, Long Island District #1, 1999-

Richard Westreich, MD
American Academy of Otolaryngology - Head and Neck Surgery
American Academy of Facial Plastic and Reconstructive Surgery
American Rhinologic Society
NY Facial Plastic Surgery Society

Michael Weiss, MD
AAO-HNS
American College of Surgeons
American Head and Neck Society
Triological Society (Fellow)
New York Head and Neck
New York Laryngologic (Past President)
Visiting Lecturer

Richard M. Rosenfeld, MD, MPH
Which child needs ventilating tubes? VII Congress of the Interamerican Association of Pediatric Otorhinolaryngology. Panama City, Panama, 7/10
Acute otitis media: to threat or not? VII Congress of the Interamerican Association of Pediatric Otorhinolaryngology. Panama City, Panama, 7/10.
Pediatric rhinosinusitis. VII Congress of the Interamerican Association of Pediatric Otorhinolaryngology. Panama City, Panama, 7/10.
Understanding clinical practice guidelines: a crash course for clinicians. Minnesota Academy of Otolaryngology, Minneapolis, MN, 10/10.
Evidence-based otitis media. Otolaryngology Grand Rounds, NYU Medical Center, NY, 3/11.

Frank E. Lucente, MD
The Rodney Dangerfield of Otolaryngology. Albert Einstein-Montefoire Medical Center, Department of Otolaryngology Graduation, New York, NY, 6/11.
The Many Worlds in Clinical Practice. Albert Einstein-Montefoire Medical Center, Department of Otolaryngology Graduation, New York, NY, 6/11

Nira Goldstein, MD, MPH

Sydney Butts, MD
Approaches to the Midface. AO Principles of Operative Treatment of Craniomaxillofacial Trauma and Reconstruction. As a faculty member for this course, served as a lab instructor for practical exercises, in addition to formal lecture presentation, Dallas, TX, 4/11.
Cleft Palatte and Velopharyngeal Insufficiency: Evaluation and Management. Department of Speech Pathology, Kingsbrook Jewish Medical Center, 5/11.
Maximizing Outcomes in Children with Cleft Palate and Velopharyngeal Insufficiency. Department of Pediatrics Grand Rounds, New York Methodist Hospital, 6/11.

Reconstructive Approaches to Congenital and Acquired Head and Neck Lesions in Children. Department of Otolaryngology Grand Rounds, Lenox Hill Hospital, 6/11.

Vishvesh Mehta, MD


Joshua Silverman, MD, PhD
Pediatric otolaryngology. Tegucigalpa, Honduras, 12/10.

Abraham Shulman, MD

Tympanic Membrane Displacement: Intracranial Pressure Determination. Department of Neurosurgery, Columbia Presbyterian Medical Center, New York NY, 4/11.

Neil Sperling, MD
Tympanic Membrane Retraction: what to do and when to do it. Xllth International Otology Course. Jean Causse Ear Clinic. Beziers, France. 6/11.


Awards, Honors, & Special Achievements

Richard M. Rosenfeld, MD, MPH
President, ASPO
Editor-in-Chief, Otolaryngology – Head and Neck Surgery Journal
Chair of AAO-HNS Guideline Development Task Force
Board of Directors, AAO-HNS Foundation
Listed in America’s Top Doctors, Castle-Connolly Medical Ltd, 2011
Listed in Top Doctors in America, Consumer Research Council, 2011
Listed in Best Doctors in America, Best Doctors Inc. 2011
Media Spokesperson for American Academy of Pediatrics
Media Spokesperson for AAO-HNS
Co-chair, AMA Sinusitis Performance Measure Group, 2010-11
Co-director, 10th International Symposium on Recent Advances in Otitis Media
Founder and Steering Group Chair, North American Community of the Guidelines International Network (G-I-N North America)
Sylvan E. Stool Memorial Lectureship, Vail, Colorado, 2011
Television interviews: CBS NewsPath (syndicated)
Radio interviews: CBS Radio, News Radio 880, Talk Radio QR7 (Alberta, Canada), Associated Press, NPR

Frank E. Lucente, MD
Graduation Speaker – Albert Einstein-Montefiore Medical Center, Department of Otorhinolaryngology, 6/11
Elected to life membership of the New York Academy of Medicine

Krishnamurthi Sundaram, MD
Listed in America’s Top Doctors for Cancer, Castle-Connolly Medical Ltd, 2010.
Listed in America’s Top Doctors, Castle Connolly Medical Ltd, 2011.
The Graduating Residents award for Outstanding Teaching and Support, Department of Otolaryngology, SUNY – Downstate Medical Center, Brooklyn, New York, 2011.

Sydney Butts, MD
Otolaryngology Faculty Award - Kings County Hospital, 2011

Christopher de Souza, MD
Editor-in-Chief, International Journal of Head and Neck Surgery
Editorial Board - the American Journal of Rhinology

Ari Goldsmith, MD
Listed in Americas Best Doctors, Castle Connolly Medical Ltd, 2011.
Nira Goldstein, MD, MPH
Listed in Best Doctors in America, Best Doctors Inc., 2011-2012

Abraham Shulman, MD
American Society for Laser Medicine and Surgery, INC., Life Associate Status, 2010-
Listed in Guide to America’s Top Physicians, Consumers Research Council of America
AAO HNS- First Named Miniseminar of the AAO-HNS: Abraham Shulman, M.D., Barbara Goldstein
PhD, Martha Entenmann Tinnitus Research Center, Inc, International Tinnitus MiniSeminar,
2010-2014.
Honoree - SUNY Downstate at 150 Years Medical Education: A Celebration of Achievement 2010
Guest of Honor- Course“Acufeni e iperacusia: management clinico e riabilitativo”- Milano, Italy
,11/10.
Guest of Honor: International Tinnitus Seminar- 1979-2011- Florionopolis, Brazil,
4/16/11- 4/19/11.

Joshua Silverman, MD, PhD
Reviewer, Otolaryngology – Head and Neck Surgery Journal

Neil Sperling, MD
Listed in America’s Top Doctors, Castle-Connolly Medical Ltd, 2011
Downstate at 150: A Celebration of Achievement

Martin J. Salwen, MD 1957
Editor

Honoring the sesquicentennial of the College of Medicine
Downstate Medical Center
State University of New York
1860 - 2010

Published by
Alumni Association - College of Medicine
2010
Abraham Shulman, MD
Dedicated to “stopping the ringing”

Richard M. Rosenfeld, MD, MPH

Shout the word “tinnitus” to any ear specialist and you will likely get a two-part response: first, the inevitable frustration in managing afflicted patients, and second, the name of Abraham Shulman as someone devoted to bringing relief. Tinnitus, Latin for “ringing,” is the perception of sound not arising from the external environment. Up to 20 percent of individuals are mildly affected, and about 1 in 200 report a severe impact on their ability to work, sleep, and function. Beethoven, Darwin, Michelangelo, and Joan of Arc all suffered.

The plight of long dead luminaries is not what drove Abe Shulman to found tinnitology as a new discipline; rather, it was his empathy for the patient before him. As reflected by Barbara Goldstein, Abe’s colleague and audiologist for 40 years, he “always puts his patient first and then looks for the best way to help each patient, adhering to the tenet always to remember to do no harm.” This passion endures, despite competing roles of surgeon, educator, researcher, and neuroscientist.

Abe’s otolaryngology residency began in 1957 at Kings County Hospital, followed by a fellowship with the otologic pioneer Julius Lempert. From 1960 to 1962, Abe served as lieutenant commander in the United States Naval Reserve as chief of otolaryngology at the Portsmouth Naval Hospital. After a brief return to Downstate, he joined the Albert Einstein College of Medicine, where he taught and practiced from 1968 to 1975.

The magic in Abe’s career began upon returning to Downstate in 1975 as acting director, then director, of otolaryngology and communication sciences. His interactions with Roger Cracco, director of neurology, and Thomas Milhoret, director of neurosurgery, stimulated interest in neuroscience. [See Cracco monograph. Ed] Upon learning of a wearable masking device (white noise generator) to treat tinnitus in 1977, Abe started the first tinnitus clinic on the East Coast. This was the “Era of the Brain” at Downstate, a time when palpable fervor over CAT scans, evoked potentials, and the pathophysiology of epilepsy set the stage for breakthroughs in tinnitus.

When Abe talked tinnitus, everyone listened; his efforts single-handedly transformed the field worldwide. Some contributions include organizing the First International Tinnitus Seminar in 1979 (now entering its 10th iteration); publishing *Tinnitus: Diagnosis and Treatment* in 1991, the first textbook devoted to tinnitus (second edition, 2004); co-founding the *International Tinnitus Journal* in 1994 as the first peer-reviewed venue on this topic; establishing the Martha Entenmann Tinnitus Research Center in 1995; and publishing over 200 scientific articles and chapters.

Abe’s greatest pride comes from identifying in 1989 a final common pathway for tinnitus, while collaborating with Dr. Arnold Strashun, director of nuclear medicine. Using SPECT and PET imaging, they linked the symptom of tinnitus to activity in the temporal and frontal lobes, proving that tinnitus was not, as previously thought, exclusively an inner ear phenomenon. Similarities emerged between tinnitus, anxiety, and depression, long considered separate entities. Most recently, they have identified a biochemical marker for tinnitus, the GABA-R receptor, leading to a novel receptor-targeted treatment protocol.

In Abe’s words, “We all have tinnitus; it’s just a question of when it manifests.” Triggering factors include age-related hearing loss and reduced masking ability in the brain. We will all owe Abraham Shulman a debt of gratitude when our own inevitable tinnitus arrives.
**Department Event:** Annual Holiday Party

Residents (L to R): Christopher Mascarinas, MD, Christina Di Loreto, MD, Roni Keller, MD, Miguel Mascaro, MD, Behrad Aynehchi, MD, Marika Fraser, MD, Marisa Earley, MD and Jonathan Cohen, MD

L to R: John Weigand and wife Sharon; Laura Caracciolo and her friend, Timothy

On the dance floor

On the dance floor
On the dance floor

(L to R): Richard Westreich, MD, Victor Lagmay, MD, Boris Bentsianov, MD and his wife, Marie, Marina Boruk, MD and her husband, Boris

(L to R): Nira Goldstein, MD, MPH, Mauro Ruffy, MD, Perminder Parmar, MD and his wife, Zulema

Billy Tang and his wife, Katherine

LICH Staff (L to R): Sophia Francis, Elaine Williams, Veronica Ortiz and Abiola Benjamin

On the dance floor

On the dance floor

On the dance floor
Publications


Aynehchi B, McCoul ED, Sundaram K. Systematic review of laryngeal reinnervation techniques.


Lucente FE: Reflections on the Power of voice. Laryngoscope 2010; 120: 2357-2359

Lucente FE: Upholding the Noble Legacy: Noblesse Oblige. Laryngoscope 2010, 120: 2138-2140


McCoul E. Legacies of the Tonsil Hospital. Otolaryngol Head Neck Surg 2010; 143: 4-7

Rosenfeld RM. Authority [editorial]. Otolaryngol Head Neck Surg 2010; 143:1-3


Rosenfeld RM. Passion [editorial]. Otolaryngol Head Neck Surg 2010; 143:737-8


Presentations

Richard M. Rosenfeld, MD, MPH


Evidence-based otitis media. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, 9/10


Bringing the culture of Cochrane to a professional medical association. 18th Cochrane Colloquium, Keystone, CO, 10/10.

Taming the statistical shrew. Otolaryngology Grand Rounds. SUNY Downstate, Brooklyn, NY, 1/11.


Quality of life and otitis media workshop. 10th International Symposium on Recent Advances in Otitis Media, New Orleans, LA, 6/11.

Office insertion of tympanostomy tubes in young children. 10th International Symposium on Recent Advances in Otitis Media, New Orleans, LA, 6/11.

Antibiotics for acute otitis media: to treat or not treat. 10th International Symposium on Recent Advances in Otitis Media, New Orleans, LA, 6/11.

Krishnamurthi Sundaram, MD

Migrating dental foreign body: a case report and literature review. Triological Section Meeting, Kierland, TX, 9/10.


Gady Har-El, MD  
Thyroid Cancer, Lenox Hill Hospital Auxiliary, New York, NY, 9/10.  
Retrosternal Thyroid. First Annual Head and Neck Symposium: Thyroid Surgery. State University of New York – Downstate Medical Center and Othmer Cancer Center, Brooklyn, New York, 12/10.  

Sydney Butts, MD  

Ari Goldsmith, MD  
Management of supraglottic dysgenesis presenting as laryngomalacia. Triological Society Annual Meeting, Chicago, IL, 4/11.  
Anesthetic management of Lingual Thyrolossal Duct Cyst in an Infant with stridor Poster presentation at the International Anesthesia Research Society Meeting, Vancouver, Canada, 5/11.

Nira Goldstein, MD, MPH  
Adenotonsillectomy Outcomes in Pediatric Sleep-Disordered Breathing. State University of New York Downstate Medical Center Department of Pediatrics Grand Rounds, Brooklyn, NY, 1/11.

Richard Kollmar, PhD  
Lithium alters growth cone mediated neurite outgrowth from adult spiral ganglion neurons. 34th Annual Midwinter Research Meeting of the Association for Research in Otolaryngology, Baltimore, MD, 2/11.

Joshua Silverman, PhD, MD  
Upper Airway Obstruction in Children. Division of Pulmonology, Department of Pediatrics, SUNY Downstate, Brooklyn, NY, 3/11.  
Laryngoscopy and Stroboscopy for Benign Laryngeal Masses. Department of Otolaryngology, LICH, Brooklyn, NY, 4/11.  
Laryngotracheal Stenosis. Division of Pulmonology, Department of Pediatrics, SUNY Downstate, Brooklyn, NY, 6/11.

Neil Sperling, MD  
Inner Ear Physiology and Hearing Loss. Department of Otolaryngology Summer Basic Science Course. SUNY-Downstate Medical Center, Brooklyn NY, 8/10.  
The Enlightened Ear Exam. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, 8/10.
Abraham Shulman, MD
Basic Tinnitus 1.1: Principles diagnosis/treatment. Department of Otolaryngology. Summer Basic Science Course. SUNY Downstate Medical Center, Brooklyn NY, 8/10.
Fluid dynamics Vascular Theory Brain/Ear, Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, 9/10

Richard Westreich, MD
Lateral Nasal Artery Flap. Triological Society/Laryngoscopy Eastern Section Annual Meeting, Chicago, IL, 4/11.

Christopher de Souza, MD
ESBLs in ENT as part of the Ranbaxy campaign on abuse of antibiotics. Tata Memorial Hospital, Mumbai India, 11/10.

Behrad Aynehchi, MD
Lasers in Otolaryngology. SUNY Downstate, Department of Otolaryngology Grand Rounds, Brooklyn, NY, 7/10.

David H. Burstein, MD

Sherry Fishkin, MD
Cutaneous Melanoma of the Head and Neck. SUNY Downstate Medical Center, Department of Otolaryngology Grand Rounds, Brooklyn, NY, 6/11.

Christina DiLoreto, MD
Lip Reconstruction. SUNY Downstate Medical Center, Department of Otolaryngology Grand Rounds, Brooklyn, NY, 3/11.

Jonathan Cohen, MD
Tracheal Resection, SUNY Downstate Medical Center, Department of Otolaryngology Grand Rounds, Brooklyn, NY, 4/11

Marika Fraser, MD
Zenkers diverticulum. Department of Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, 1/11

Roni Keller, MD

Anita Konka, MD

Haidy Marzouk, MD

Christopher Mascarinas, MD

Miguel Mascaró, MD
Otosclerosis. Department of Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, 8/10.

Gennadiy Vengerovich, MD
Atypical Presentation of Recurrent Thyroglossal Duct Cyst in a Pediatric Patient, The Annual Meeting of the Eastern Section of the American Laryngological, Rhinological and Otological Society, Scottsdale, Arizona, 1/11.
Affiliated Hospitals

UNIVERSITY HOSPITAL OF BROOKLYN AT LONG ISLAND COLLEGE HOSPITAL

A 551 bed medical center in the Brooklyn Heights/Cobble Hill area of Brooklyn, University Hospital of Brooklyn at Long Island College Hospital (LICH) is the main location of the administrative and clinical offices of the Department of Otolaryngology, as well as the Division of Communicative Disorders. LICH also operates a CT head and whole body scanner, MRI scanner, an ESRD unit and 26 CRDS stations, and a nuclear medicine facility.

The hospital offers approved residency training programs in the following disciplines: allergy and immunology, dentistry, diagnostic radiology, internal medicine, nuclear medicine, obstetrics and gynecology, and pediatrics. The hospital’s programs in the following disciplines are fully integrated with those of the Health Science Center: anesthesiology, neurology, orthopedics, ophthalmology, otolaryngology, radiation therapy, surgery and urology.

Five residents rotate at LICH including one resident in a research rotation during the third otolaryngology year. LICH has an active emergency room. The hospital also has a large medical library containing 6,000 texts and 400 journals. The Department of Otolaryngology has its own library of recent otolaryngology texts, videotapes, current journals and a computer workstation for resident use. Grand Rounds and Basic Science lectures are held in this institution which is easily accessible from all affiliated hospitals. Animal surgical facilities are located across the street from the hospital with three full-time veterinary and technical staff.

The Department of Otolaryngology is actively involved in large and small animal research, basic science, and audiological research in this institution. Four full time audiologists perform all current tests and are engaged in several projects. Long Island College Hospital has an approved residency in Allergy and Immunology with a full time director. Both departments share clinical and academic programs.

A Temporal Bone Surgical Dissection Laboratory was installed in January 1994 and is fully equipped with surgical instrumentation and microscopes. The educational capabilities are enhanced by a full video system to highlight video taped instruction as well as monitoring of an instructor’s dissection. The laboratory has stimulated an increased utilization of Temporal Bone teaching. Our residents currently receive a three month instruction course in Temporal Bone anatomy and surgical dissection in each of their four years of training. Post graduate courses, including the instruction of laser application to Otologic surgery, are held on a regular basis at this facility.

UNIVERSITY HOSPITAL OF BROOKLYN

University Hospital of Brooklyn (UHB) is a 354-bed teaching and research hospital which functions as a regional referral center for the boroughs of Brooklyn and Staten Island. The hospital has the largest kidney transplantation program on the eastern seaboard and performs approximately 100 renal transplants a year. It is also a major referral center for neonatal intensive care, high-risk obstetrics, oncology services and neuroscience. The Department of Otolaryngology has a full service presence with specialty services in Head and Neck Surgery and Neurotology. A Tinnitus Clinic has been in operation since 1977 and has evaluated and treated over 25,000 patients with severe disabling tinnitus. Head and Neck Surgery and the Pediatric Otolaryngology Service are active and multidisciplinary conferences are held regularly with corresponding medical specialties. The former otolaryngology clinic has now been renovated and changed into a facility which treats both private and clinic patients. The full array of otolaryngologic subspecialties are represented including Otology, Head and Neck, Oncology, Pediatric Otolaryngology, and Facial Plastic and Reconstructive Surgery.

KINGS COUNTY HOSPITAL CENTER

Kings County Hospital Center has a rich legacy for its pioneering role in medicine. Today, with over 627 beds, it remains on the cutting edge of technology and provides the most modern procedures with state-of-the-art equipment. Built in 1831 as a one room infirmary for publicly supported care of the sick, Kings County Hospital Center continues to be a leading healthcare facility whose mission is to provide care to everyone regardless of their ability to pay. The hospital provides a wide range of health services, and specialties are offered in all fields of modern medicine. More than 200 clinics provide a wide array of ambulatory care services. Kings County Hospital Center operates a world-renowned Level 1 Trauma Center, one of only three in the borough, which serves 2.6 million residents of Brooklyn and Staten Island. KCHC,
Department of otolaryngology is a member institution of the New York City Health & Hospitals Corporation (HHC), is located in the heart of Brooklyn at the juncture of Crown Heights and East Flatbush. The hospital serves the Brooklyn community as both the family doctor and a major provider of a full spectrum of health care services. Throughout its history, the hospital has played a major role in meeting the health care needs of its surrounding population. This role is challenged by the growth of problems with AIDS, drugs, mental health, TB, homelessness, and other epidemics which strain existing resources and means for effective and efficient health care delivery.

The Department of Otolaryngology is extremely busy at KCHC and runs an active out-patient facility, in-patient consultation service and surgical schedule. Four residents cover KCHC and UHB as a combined service, with the assistance of one general surgery resident and a dedicated otolaryngology physician assistant. The Department of Otolaryngology has scheduled Operating Room activities five days a week. All otolaryngologic subspecialties are covered with emphasis on head and neck cancer surgery, facial plastic and reconstructive surgery, pediatric otolaryngology and maxillofacial trauma. Matthew B. Hanson, MD is the director of the service and he is assisted by 10 additional part-time and voluntary board-certified otolaryngologists.

Brooklyn Veterans Administration Medical Center

The Veterans Administration Hospital at Brooklyn is located in the southern corner of Brooklyn at the base of the Verrazano Bridge. This acute care facility has 392 beds. Associated with the main hospital is a long term care facility at St. Albans which is located in the eastern section of Brooklyn approximately 4 miles away. This institution has 443 acute and chronic care beds.

The Otolaryngology service is a section of the Department of Surgery. This section is covered by 5 faculty members who are associated with the SUNY Health Science Center at Brooklyn. The attending staff has fellowship training in head and neck cancer surgery, otology and neuro-otology, facial plastics and reconstructive surgery. The Otolaryngology Section has operating room time 4 days a week.

A senior resident functions as a chief resident and manages the ENT Service. The chief resident is responsible for all admissions, discharges, outpatient clinic visits and surgical scheduling, and also supervises the junior resident and reports directly to the section chief. The junior resident’s graduated responsibility in the operating room and clinic depends upon the resident’s experience and capabilities. The resident scrubs on all surgical cases as either the surgeon or first assistant and is directly responsible for the care of the in patient service.

The Otolaryngology Section currently has an outpatient clinic which meets four times a week and holds a tinnitus clinic every Friday. A head and neck tumor board has been established for every Monday where members of the chemotherapy, radiotherapy, radiology and pathology services are available to discuss head and neck cancer patients currently under treatment. An attending is assigned to each clinic to provide resident supervision and daily teaching rounds are performed by these attendings.

The Brooklyn VA Hospital Center provides an ample source of patients primarily in head and neck oncology, reconstructive surgery, facial plastic surgery and otology for the otolaryngology residents. The patient population demonstrates many cases of head and neck cancer secondary to alcohol and smoking abuse. In addition, the effects of aging on the auditory system are widely observed. The large volume of oncologic patients allows for the development of diagnostic techniques as well as for the performance of numerous surgical procedures. The Otolaryngology Clinic and operating room suites offer all contemporary equipment for video stroboscopy, sinus and otologic endoscopy, otomicroscopy, and fiberoptic laryngoscopy. In addition, clinic laser surgery has also been established. A Tinnitus Center has been established.

Establishment of the Center has led to the development of various testing protocols for a very large population of patients with this condition.

Maimonides Medical Center

A 705-bed hospital, Maimonides Medical Center is the third largest independent teaching hospital nationally in the size of its training programs, providing a full range of inpatient and outpatient medical and surgical care.

Maimonides sponsors 19 residency training programs and three SUNY-HSCB integrated programs with close to 400 residents and fellows. With over 40% of its residents in primary care positions, Maimonides continues to strive to meet the demand for generalist physicians.
It has recently been accredited for its Primary Care Medicine Residency Program. Through intensive recruitment, it has recently added five full time primary care faculty. A Certificate of Need has been obtained for a primary care facility in Borough Park to provide care to an underserved community of Russian immigrants, and the Medical Center is in the process of making curriculum changes in Medicine, Pediatrics and Obstetrics and Gynecology to reflect an increased focus on primary care training.
Educational Programs

EXECUTIVE SUMMARY
The Department of Otolaryngology at SUNY Downstate Medical Center/Long Island College Hospital had intensive continuing medical education activities during the academic year of 2010-2011. The mission of our department’s activity is to provide formal education, disseminate new information, provide a forum for presentation and discussion, and to ensure improvements and adjustments based on feedback from attendees.

The department’s continuing education is based mainly on Grand Rounds, a weekly conference that takes place at the Long Island College Hospital site for three hours on Thursday mornings. All Otolaryngology, Audiology, Speech and Language Pathology professionals as well as professionals in related disciplines are invited. The conference is mandatory for the faculty and residents of our department. Attendance at our weekly conference numbered between 20 and 30 attendees per session, with total attendance of 1100.

The morning conference is divided into three parts. Different aspects of basic sciences as related to the field of Otolaryngology-Head & Neck Surgery are presented and discussed during the first hour. Experts in fields such as Audiology, Speech and Language Pathology, Anatomic Pathology, Head and Neck Radiology, and Cell Biology provide formal presentations. In-house speakers and faculty as well as residents present information during the second hour. Also, biweekly Head and Neck Tumor Board are also included in the schedule for the second hour. During the third hour, lectures are delivered by invited guests who are nationally known for their expertise and experience in a variety of topics.

The roster of guest speakers for 2010-2011 is included in this report. In general, all speakers gave excellent lectures with organized information relevant to the practice of Otolaryngology-Head and Neck Surgery. The overall quality of the presentation was rated highly, as per the anonymous evaluation forms submitted. Practitioners, as well as residents, use the information which is disseminated during these conferences for their day to day clinical practice. The same lectures are used also as a forum for the audience to ask questions and to discuss difficult cases.

The major strength of this program is the diversity of the topics discussed and their relevance to the clinical practice of all attendees. This Grand Rounds Conference format will continue, with three hours dedicated to a single topic which is explored in depth. There are also plans to increase the number of conferences to accommodate additional COCLIA sessions and mock oral board examination practice.
**Goals and Objectives for Resident Education**

An important part of the mission of the Department of Otolaryngology is the provision of optimal education to all residents enrolled in the training program. With regard to that educational program, the following goals and objectives are identified:

- It is the primary goal that graduates of the departmental training program will possess all necessary skills, knowledge, attitudes and personality characteristics to be outstanding practitioners of contemporary otolaryngology-head and neck surgery.

- Fulfillment of the departmental educational curriculum, including education in the comprehensive medical and surgical care of patients with diseases and disorders that affect the ears, the upper respiratory and upper alimentary systems and related structures, and the head and neck. The educational program includes the core knowledge, skills and understanding of the basic medical sciences relevant to the head and neck region, the upper respiratory and upper alimentary systems, the communication sciences, including the knowledge of audiology and speech pathology and audiologic and speech rehabilitation; and the chemical senses, as well as allergy, endocrinology, and neurology as they relate to the head and neck area. The education program also includes the clinical aspects of diagnosis and medical/surgical management for neoplastic, infectious, inflammatory, allergic, congenital, degenerative and traumatic afflictions of these areas, as well as management of otolaryngologic emergencies.

- Work with institutional leadership to assure that the educational program is in compliance with all ACGME institutional and program requirements, including but not limited to qualified faculty, optimal facilities and resources, and sufficient patient volume with appropriate diversity.

- Understand cultural issues involved in otolaryngologic diseases and in the treatment of patients from diverse backgrounds.

- Understand the ethical basis of medical practice and develop the skills and attitudes essential to the practice within contemporary ethical guidelines.

- Acquire the knowledge and skills essential to the practice of the business side of medicine, including the cost-efficient management of patients and practice within systems-based entities.

- Understand the role of the physician as teacher and acquire the skills to teach patients and colleagues. Learn the techniques for educating medical students through both role-modeling and direct didactic methods, as well as the techniques for evaluating student performance.

- Develop the skills and attitudes necessary for collegial practice with all members of the health care team.

- Understand the role of quality assessment in both education and clinical practice and contribute to quality assurance/performance efforts.

- Understand the principles of basic science research and its relevance to clinical practice. Understand the principles and practice of outcomes research. Provide the opportunity and guidance for conducting research projects.

- Develop an appreciation for the medical literature, an understanding of the responsibility to contribute to the literature as part of an overall professional responsibility, and the skills to make suitable contributions. Develop the skills necessary for performing medical literature (written and electronic) search and research. Develop the skills necessary for reading, understanding and interpreting medical literature as well as selecting the appropriate information for application in clinical practice.
• Assist resident in developing a commitment to life-long education and continuing professional development.

• Assist residents in preparing for and passing the certifying examination of the American Board of Otolaryngology and any subsequent recertification examinations.

• Understand the role of fellowships and assist each resident to make an informed decision regarding whether to pursue fellowship training.

• Understand the need for a balance between professional and personal pursuits and make sure that the training program provides the individual resident with the support to achieve an appropriate balance between the two.

• Understand the medical/legal aspects of clinical practice and develop the essential skills and knowledge to practice without incurring undue risk.

• Develop the communication skills necessary for a clinical career.

• Participate actively in the departmental educational program and provide feedback on the program and faculty. Develop the attitude that issues can be raised without fear of retaliation. Appreciate the responsibility of the individual resident to help the department and institution to achieve their overall educational goals.

• Understand and use contemporary information technology in clinical and educational program.

• Experience progressively increased levels of responsibility and develop leadership skills.

• Participate in the selection of incoming residents.

• Assure that all residents fulfill the six general competencies articulated by the ACGME, namely patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and system-based practice.

• Understand the role of accrediting agencies and participate in the peer review process with ACGME, ACCME, JCAHO, LCME and other accrediting entities.

--Revised, December 29, 2000
--Reiterated, October 1, 2002
--Reiterated, June 30, 2005
--Reiterated, July 1, 2009
--Reiterated, August 18, 2011
Medical Student Program and Opportunities

The Department of Otolaryngology has a strong commitment to medical student education and to exposing students to the field as early as possible during medical school. The following opportunities are available:

Introduction to Clinical Medicine: During the second year the department presents a lecture and two-hour practical session on the history and physical examination in otolaryngology.

Career Exposure Elective (first & second year students): Students observe basic operative procedures and techniques of history and physical examination in general otolaryngology and pediatric otolaryngology. Students observe residents and attending physicians in the clinic setting and operating room. Students have the opportunity to attend departmental Grand Rounds at Long Island College Hospital, morbidity and mortality sessions, multidisciplinary tumor board conferences, and other conferences.

Third Year Clerkship Program via the Department of Surgery: Third year students complete a four week clerkship for students contemplating applying to otolaryngology residency. The student “shadows” an attending during outpatient clinic and inpatient rounds. Students have the opportunity to attend departmental Grand Rounds at Long Island College Hospital, morbidity and mortality sessions, multidisciplinary tumor board conferences, and other conferences. Each student makes a 10-minute presentation at the completion of his/her clerkship.

Elective in Third Year: Third year students may take a 2 or 4 week elective in either general otolaryngology or pediatric otolaryngology. The experience includes participation in daily teaching rounds and work rounds with attendings and residents involved in inpatient care, participating in the operating room procedures, working in the ambulatory clinics, participating in all teaching conferences in including weekly grand rounds at Long Island College Hospital, weekly head-and-neck tumor journal club at Kings County Hospital Center and other conferences. Each student makes a 10-minute case discussion and literature review at the final grand rounds during the rotation. Guidance is provided in the preparation of this presentation.

Elective in the Fourth Year: Fourth year students may also take a 2 or 4 week elective in general otolaryngology. The experiences are similar to those listed for the third year elective.

Elective Goals

While the above electives each have different schedules and levels of responsibility, the goals and objectives remain very similar. The successful student will hopefully begin to investigate and study the following by completion of his or her elective:

1. The specifics and nuances of the ENT History and Physical Examination.
2. Differential diagnosis formulation in patients with problems of the head and neck region.
3. Criteria for appropriate referral to an Otolaryngologist.

Basic understanding of the most commonly encountered problems of the head and neck region, including otitis media and otitis externa, sinusitis, adenotonsillar disease, head and neck cancer, upper airway obstruction, and hearing loss.

Otolaryngology Club: The department is working with interested students on the creation of an Otolaryngology Club for students who would like to come in contact with the field as early as possible. Opportunities will be provided for students to shadow and attending for a brief period as well as to observe in clinics whenever possible. Further details will be posted.

Research Opportunities: Students who would like to explore research opportunities, either during the summer or during the academic year, are encouraged to contact the departmental office for further information.
Reading: The department has prepared a textbook, Essentials of Otolaryngology (edited by Frank E. Lucente, MD and Gady Har-El, MD) which is now in its fifth edition. This text is oriented toward medical students and primary care practitioners. In addition to the English edition, it has been published in Italian, Spanish and Turkish.

Career Advisors: All senior faculty members have offered to serve as faculty advisors. Students who would like to explore the field and obtain more information are invited to contact Nicole Fraser, Educational Coordinator (718.270.1638) who can set up appointments with Nira Goldstein, MD (coordinator of medical student programs) and Richard M. Rosenfeld, MD, MPH (departmental chairman).
Temporal Bone Surgical Dissection Laboratory

The Temporal Bone Laboratory is an important aspect of Otolaryngology Training. Continuous education in the intricacies of temporal bone anatomy and surgical technique is extremely important in the practice of otology. A fully equipped laboratory is maintained on the campus of Long Island College Hospital. It is equipped with 8 workstations containing microdissection instruments, microscopes and drills for detailed study of temporal bone anatomy. An additional instructor’s station equipped with video camera, classroom video monitors for demonstration or video review, and other teaching tools (charts, dissection manuals and models) enhances the educational experience.

Resident education as well as post-graduate courses, take place on a regular basis. Comprehensive study of anatomy and surgical technique is guided by several otologic surgeons and covers labyrinthine procedures and skull base techniques. The laboratory is available to all members of the department for independent study. Our residents and attendings are encouraged to utilize the laboratory as the need arises.
Conference Chair
Richard W. Westreich, MD
Assistant Professor of Otolaryngology
SUNY Downstate Medical Center
Director of Resident Training and
Facial Plastic Surgery Division
Long Island College Hospital
Brooklyn, New York

Invited Faculty
Sonya Malekzadeh, MD, FACS
Associate Professor of Otolaryngology – Head and Neck Surgery
Georgetown University, Washington, DC
Coordinator-Elect for Education and Chair, Women in Otolaryngology Section
AAO-HNS Foundation, Alexandria, VA

Dennis Lee, MD, MPH
Alumnus, SUNY Downstate Otolaryngology Residency Training Program
Partner and Pediatric Otolaryngologist
Ireland Grove Center for Surgery
Bloomington, IL

SUNY Downstate Faculty
Richard M. Rosenfeld, MD, MPH
Professor and Chairman of Otolaryngology

Frank E. Lucente, MD
Professor of Otolaryngology

Marina Boruk, MD
Assistant Professor of Otolaryngology

Sydney Butts, MD
Assistant Professor of Otolaryngology

Ari J. Goldsmith, MD
Associate Professor of Otolaryngology

Richard Kolmar, PhD
Visiting Associate Professor of Cell Biology

Joshua B. Silverman, MD, PhD
Assistant Professor of Otolaryngology

SUNY Downstate Residents
Behrad Aynehchi, MD
David Burstein, MD
Sherry Fishkin, MD
Marika Fraser, MD
Roni Keller, MD
Haidy Marzouk, MD
Miguel Mascaro, MD
Christopher Mascarinas, MD
Alumni and Resident Research Day
SUNY Downstate Medical Center — June 14, 2011

AGENDA

9:30 AM  Registration & Coffee
10:00 AM  Welcome — RW Westreich
10:10 AM  Introductory remarks — RM Rosenfeld
10:20 AM  Highly-rated low-cost task trainers in otolaryngology — S Malekzadeh
11:10 AM  Life after residency: lessons learned — D Lee
11:55 AM  Update on medical management of sinusitis and allergic rhinitis — M Boruk
12:15 PM  Lunch
1:15 PM   Utility of nasopharyngeal culture in managing chronic addenoiditis — H Marzouk
1:35 PM   Systematic review of perioperative steroids for thyroidectomy — C Mascarinas
1:55 PM   Prevalence of sleep-disordered breathing in children with asthma and its behavioral consequences — S Fishkin
2:15 PM   Multidisciplinary management of cleft and craniofacial disorders — S Butts
2:30 PM   Lateral nasal artery pedicle island flap for nasal alar defects — B Aynehchi
2:45 PM   Role of C1q domain proteins in otolith morphogenesis — R Kollmar
3:05 PM   Balloon and CO2 fiber: a marriage made in heaven — A Goldsmith
3:25 PM   Coffee Break
3:45 PM   Foreign body removal from the temporalis fascia — M Fraser
3:55 PM   Efficacy of adenotonsillectomy in pediatric sleep-disordered breathing — D Burstein
4:15 PM   Translational research in laryngology: from bedside to bench and back — J Silverman
4:35 PM   Prevalence of sleep-disordered breathing in children with sickle cell disease and its association with transcranial doppler screening — R Keller
4:55 PM   Systematic review of the association between otitis media and gastroesophageal reflux disease — M Mascaro
5:15 PM   Be all you can be: boot camp preparation for residency — S Malekzadeh
5:50 PM   Concluding remarks — FE Lucente, RW Westreich
6:00 PM   Adjourn
Abstract Presenters

1:15PM: Haidy Marzouk MD, Behrad Aynehchi MD, Punam Thakkar, Tehila Abramowitz, Ari Goldsmith MD
The Utility of Nasopharyngeal Culture in the Management of Chronic Adenoiditis

Objective: To examine the utility of nasopharyngeal culture in the management of children with chronic adenoiditis to determine if it results in a change in antibiotic therapy.

Study Design: Retrospective chart review of patients in an outpatient setting.

Methods: Chronic adenoiditis was defined as cough, postnasal drip, and congestion for over three months with endoscopic evidence of nasopharyngeal purulence with normal anterior rhinoscopy and middle meati. Standard treatment was defined as amoxicillin clavulanate or amoxicillin clavulanate ES-600 in non-penicillin allergic patients, and cefuroxime or clarithromycin for penicillin allergic patients. Nasopharyngeal culture results and antibiotic prescriptions were reviewed to look for a change from the standard.

Results: Of 207 patients diagnosed with chronic adenoiditis, 198 had nasopharyngeal cultures (119 male, 79 female, mean age 3.7 years). The most common organisms isolated were Streptococcus pneumoniae sensitive to penicillin in 40 cultures (20.2%), Streptococcus pneumoniae intermediate or resistant to penicillin in 26 (13.1%), Moraxella catarrhalis in 27 (13.6%), Haemophilus influenzae in 57 (28.8%), and Staphylococcus aureus intermediate or resistant to penicillin in 26 (13.1%). 13.3% of S. aureus isolated was methicillin resistant. 103 (52.0%) children required different antibiotics from the standard, and 26 (13.1%) had no antibiotics prescribed based on a negative culture. Of the 87 children suspected to have upper airway reflux, 25 (28.7%) had negative cultures. Of the 135 patients with follow-up, 50 (37.0%) reported resolution and 50 (37.0%) reported improvement of their symptoms.

Conclusion: Nasopharyngeal culture has significant utility in the choice of antibiotics for children with chronic adenoiditis.

1:35PM: Christopher Mascarinas MD, Behrad Aynehchi MD, Richard M. Rosenfeld MD MPH, Perminder Parmar MD
Perioperative Steroids Before Thyroidectomy: A Systematic Review with Meta-Analysis

Objective: To determine whether systematic review with meta-analysis supports the use of corticosteroids to reduce postoperative nausea, vomiting, pain, and voice dysfunction after thyroidectomy.

Methods: A systematic review of currently available randomized controlled trials in the EMBASE and PUBMED databases comparing intravenous perioperative corticosteroids with placebo to prevent postoperative nausea, vomiting, pain, or voice dysfunction was performed by two independent reviewers. The quality of studies was evaluated and results synthesized using standard random-effects meta-analysis methods.

Results: Eight randomized controlled trials were eligible for review. Dexamethasone reduced the absolute incidence of postoperative nausea at 24h by 18% (95% CI, 2-8-27%), P<.001, and postoperative vomiting at 24h by 27% (95% CI, 13-40%), P<.001 in 4 trials with 304 patients. Dexamethasone increased the absolute incidence of complete response to steroids by 30% (95% CI, 7-52%), P=0.11 in 3 trials with 246 patients. Dexamethasone reduced the absolute VAS score for pain (0-10 scale) at 24h by 1.32 95% CI (0.49-2.15), P=.002 in 3 trials with 232 patients. There was insufficient data to perform meta-analysis for voice dysfunction.

Conclusions: These results argue strongly for routine use of dexamethasone during thyroidectomy because the intervention is safe and only about 2.5 patients need treatment to prevent one episode of postoperative nausea or vomiting.
**1:55PM:** Sherry Fishkin MD, Nira Goldstein MD MPH, Haesson Lee MD, Diana Weaver MD  
The Prevalence of Sleep-Disordered Breathing in Children with Asthma and its Behavioral Consequences

**Objective:** Our objectives are to determine the prevalence of sleep-disordered breathing (SDB) in children with asthma compared to non-asthmatic children and to determine if behavior problems are independently associated with asthma and SDB.

**Study Design:** In this cross-sectional study of 280 children, aged 2 to 14, with asthma and 280 control children without asthma attending routine visits, parents/guardians will complete the Sleep-Related Breathing Disorders Scale (SRBD) of the Pediatric Sleep Questionnaire (PSQ) and the Child Behavior Checklist (CBCL) for ages 1½ to 5 or 6 to 18. Snoring children (as determined by the PSQ) will be referred for overnight polysomnography. Asthma severity will be classified based on NIH guidelines, the patient’s height and weight will be obtained from the office visit and body mass index will be calculated. Two-way frequency tables reporting odds ratios with 95% confidence intervals and Fisher exact test p-values will be constructed to compare SDB in asthmatic versus non-asthmatic children and a 2-tailed independent samples t -test will be performed to compare the apnea-hypopnea index in asthmatic versus non-asthmatic children. Logistic regression modeling will be performed to compare SDB with age, gender, race/ethnicity, prematurity, BMI percentile, asthma severity, allergies, and socioeconomic status. Linear regression modeling will be performed to compare CBCL scores with SDB, asthma severity, race/ethnicity and socioeconomic status. Logistic regression modeling will be performed to compare CBCL abnormal total problem score with SDB, asthma severity, race/ethnicity and socioeconomic status.

**Setting:** The study is being conducted at SUNY Downstate medical center currently, and we plan to include patients at Kings County Hospital as well, pending IRB approval.

**Results:** No significant data can be extracted at this time as the study is ongoing.

**Conclusions:** Pending as per completion of study.

**2:30PM:** Behrad Aynehchi MD, Richard Westreich MD  
Lateral Nasal Artery Pedicled Island Flap for Repair of Nasal Alar Defects

**Educational Objective:** At the conclusion of this presentation, the participants should be familiar with the analysis of lower nasal defects and indications for various reconstructive techniques with particular attention to vascular anatomy, structural support, and preservation of aesthetic landmarks.

**Objectives:** Defects of the nasal alar subunit pose unique corrective challenges due to natural folds and sharp transition lines that are difficult to reconstruct within a region devoid of cartilaginous support or freely dissectable planes. The lateral nasal artery island flap was designed for moderate alar lesions that do not involve the alar rim or supra-alar crease. This well-vascularized flap performed in a single-stage affords acceptable texture and color matches while avoiding violation of the supra-alar crease. Our initial experience with this new technique is described.

**Study Design:** Case series

**Methods:** Three patients underwent the lateral nasal artery island flap between 2008 and 2010 and were followed for a period of up to one year with photo documentation. All three subjects had cartilage grafts for alar support as well.

**Results:** All repairs yielded satisfactory results with no necrosis, alar notching, or flap loss. Overall symmetry in addition to symmetry of the alar base, tip, and donor site were intact. Color and texture match, including the alar-facial junction, were excellent as well. One patient required a post operative steroid injection for pin cushioning. All patients were satisfied with the functional and aesthetic results.

**Conclusions:** For alar defects up to 1.5 cm sparing the supra-alar crease and free alar margin, the lateral nasal artery pedicled island flap has been shown to provide acceptable repair with regards to color and texture match in a limited series of patients. We recommend this technique for its simple donor site closure and minimal effacement of the lower nasal landmarks.
3:45PM  Marika Fraser MD, Richard M. Rosenfeld MD MPH
Migrating Foreign Body After a Dental Procedure- A Case Report and Literature Review

Objective: To report a case and review the literature on the localization techniques and surgical approaches used to retrieve a broken dental needle from the soft tissue of the head and neck.

Study design: A case report illustrating the migration of a soft tissue foreign body, a 27 gauge needle which was broken during a dental procedure and within two days had migrated from its point of entry in the oral cavity to the infra temporal fossa and finally its retrieval from the temporalis muscle.

Methods: We reviewed the literature to identify the use of different needle localization technique and compare these to the use of intra operative x-ray use by a surgeon to compliment the surgical plan in retrieval of the broken needle from the soft tissues of the head and neck.

Results: Identification of a broken needle in the head and neck can be quite difficult depending on the location, timing and mechanism of entry. The use of preoperative and intra operative radiologic imaging is vital in demonstrating the location of the radio opaque object and can complement the surgical exploration.

Conclusion: This case report demonstrate that once a broken needle is identified they should be removed because of the potential for migration to vital organs within the head and neck. The incidence of a broken dental needle is quite rare but because of the potential for major complications it is recommended to retrieve the broken needle immediately after discovery.

3:55PM:  David Burstein MD, Kathy Graw-Panzer MD, A Jackson BA, Samir Fahmy MD, Nira Goldstein MD MPH
Efficacy of Adenotonsillectomy in Pediatric Sleep-Disordered Breathing

Objectives: To determine the efficacy of adenotonsillectomy (T&A) in the treatment of children with sleep-disordered breathing (SDB) as determined by positive polysomnography (PSG) compared to a control group of untreated children.

Study Design: Matched historical cohort study

Methods: The charts of all children aged 1-12 who underwent PSG at the SUNY Downstate or Kings County Hospital sleep laboratories between 1/2006 and 6/2009 were reviewed to identify children with positive studies (AHI³5 or AI³1). Parents of those with positive studies and a history of tonsil hypertrophy were contacted, and they were offered admission into the study if the child was not treated with T&A. These control subjects were matched by age, gender, time since initial PSG, and AHI to children who underwent total T&A for SDB, and parents of these matched experimental subjects were then contacted for participation. All subjects who agreed to participate were subsequently evaluated by a clinical assessment score, follow up PSG, and the Child Behavior Checklist (CBCL). Continuous variables were compared using 2-tailed paired t tests, and a Fisher exact test was used for categorical values.

Results: Twelve matched pairs of subjects completed the assessments. There was no significant difference in mean change in AHI between the surgical and nonsurgical groups (10.7±9.7 vs. 5.7±8.1, p=0.105). The number of patients with follow up AHI<5 was also similar between groups [10 experimental (83.3%) vs. 8 control (66.7%), p=0.640], but the surgical group had significantly greater subjects with follow up AHI<2 [9 (75%) vs. 3 (25%), p=0.039]. The mean CBCL total problem score was significantly lower in the T&A group [19.3±11.7 vs. 39.8±29.9, p=0.017], though the number of subjects with abnormal or borderline CBCL total problem scores was not significantly different [0 surgical vs. 3 (25%) nonsurgical, p=0.217]. The number of subjects reporting snoring was significantly lower in the T&A group [4 (33.3%) vs. 11 (91.7%), p=0.009], as was the number reporting apneic pauses [0 vs. 9 (75%), p<0.001].

Conclusions: T&A was effective in reducing snoring and apneic pauses, lowering CBCL total problem scores, and normalizing sleep study indices as compared to no surgical intervention. The natural resolution rate of SDB was 25% in untreated children.
The Prevalence of Sleep-Disordered Breathing In Children With Sickle Cell Disease And Its Association With Transcranial Doppler Screening

**Objectives:** 1) To determine the prevalence of sleep-disordered breathing (SDB) in children with sickle cell disease (SCD). 2) To determine whether there is an association of snoring and SDB with cerebrovascular risk due to increased transcranial Doppler ultrasonography (TCD) velocity.

**Methods:** Parents of 65 children (34 boys, 31 girls; mean age 8.2 ±3.8 years) selected only for eligible genotype (SS or Sb0-thalassemia) and age (2-14 y) and no history of stroke completed the Pediatric Sleep Questionnaire (PSQ). Overnight polysomnography (PSG) was obtained for all children with snoring, and was considered positive if the apnea hypopnea index was ≥ 2. TCD was performed on all children; for transfused children, TCD readings prior to transfusion were analyzed. Children with abnormal or conditional TCD (flow velocity ≥ 170 cm/sec in any vessel) were considered high risk.

**Results:** The prevalence of snoring was 38.5% (95% CI 27.6-50.6) and the prevalence of SDB was 20.0% (95% CI 11.6-32.4). Eighteen (27.7%) children screened with PSQ had a prior adenoidectomy (11 with tonsillectomy). There was no significant difference in TCD velocity between snorers and non-snorers (154.5±39.2 vs. 152.7±35.7, p=.858, unpaired t-test) or between snorers with SDB and snorers with normal PSG/non-snorers (148.1±36.0 vs. 155.1±36.2, p=.591). There was no association between snoring or SDB and high risk TCD (p=.761 and p=1.0, respectively, Fisher exact test).

**Conclusions:** There is a high prevalence of snoring and SDB among children with SCD, but our results do not support an association with higher risk TCD velocities.

**Systematic review: Association between otitis media and gastroesophageal reflux**

**Background:** Chronic otitis media with effusion and recurrent acute otitis media are highly diagnosed conditions in the first years of life, affecting a child’s quality of life and may lead to surgical intervention. Gastroesophageal reflex is being suggested as a potential trigger of otitis media, and in the last decade studies have been published demonstrating its prevalence through 24 hour pH monitoring and detection of pepsin/pepsinogen in the middle ear.

**Objectives:** Evaluate the quantity and quality of gastroesophageal reflux studies associated with chronic otitis media with effusion and recurrent acute otitis media. Evaluate the validity of pepsin/pepsinogen into middle ear as a gastroesophageal reflux marker.

**Data Source:** Cochrane library, MEDLINE (from 1966-December 2010), EMBASE (from 1974 - December 2010), proceedings of the International Symposia on Recent Advances in Otitis Media, and reference lists of relevant selected articles.

**Study eligibility criteria, Participants and Interventions:** Study selection was carried out independently by two reviewers. Studies with planned data collection, in children with chronic otitis media with effusion or recurrent acute otitis media, assessing gastroesophageal, or laryngopharyngeal reflex, were included. Studies with duplicate patients, in adults or in nonhuman species were excluded.

**Study appraisal and synthesis methods:** Studies were evaluated by 2 independent reviewers through a quality assessment score and a data collection form. Quality assessment score considered consecutive samples, eligibility criteria, method of reflux evaluation and method of otitis media diagnosis. Data were extracted from predetermined endpoints in a collection form with checks for interobserver agreement.
Annual Frank E. Lucente Alumni and Resident Research Day

(L to R) Richard Westreich, MD, Conference Chair, Sonya Malekzadeh, MD, Invited Faculty and Dennis Lee, MD, Invited Alumni

Edward McCoul, MD, a 2010 alumnus

Richard Kollmar, PhD, Director of Basic Science Research (L) and Abraham Shulman, MD (R)
### THE FIRST ANNUAL HEAD & NECK SYMPOSIUM: THYROID SURGERY

**Friday, December 10, 2010**  
**8:30am–5:30pm**

#### Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Department</th>
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<tbody>
<tr>
<td>Krishnamurthi Sundaram,  MD, FACS</td>
<td>Professor, Department of Otolaryngology, SUNY Downstate Medical Center</td>
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<tr>
<td>Perminder S. Parmar, MD</td>
<td>Chairman, Department of Otolaryngology-Head and Neck Surgery, Lenox Hill Hospital</td>
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<tr>
<td>Shawn Ciecko, MD</td>
<td>Clinical Instructor, Department of Otolaryngology, Long Island College Hospital</td>
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<tr>
<td>Richard M. Rosenfeld, MD</td>
<td>Professor &amp; Chairman, Department of Otolaryngology, SUNY Downstate Medical Center</td>
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<tr>
<td>Antonio Alfonso, MD</td>
<td>Distinguished Professor &amp; Chairman, Department of Surgery, SUNY Downstate Medical Center</td>
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<tr>
<td>Ashok R. Shaha, MD, FACS</td>
<td>Chair in Head and Neck Surgery and Oncology, Memorial Sloan Kettering Cancer Center</td>
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<tr>
<td>Gady Har-EI, MD, FACS</td>
<td>Professor, Department of Otolaryngology, SUNY Downstate Medical Center</td>
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<td>Deborah Reede, MD</td>
<td>Chairman, Department of Radiology, Long Island College Hospital</td>
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<tr>
<td>Krishnamurthi Sundaram, MD</td>
<td>Clinical Professor, Vice-Chairman, Chief of Head &amp; Neck Surgery, Department of Otolaryngology, Long Island College Hospital</td>
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<tr>
<td>Vladimir Privman, MD</td>
<td>Chief of Endocrinology, Long Island College Hospital</td>
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<tr>
<td>Teresa Alasio, MD</td>
<td>Assistant Professor, Director of Cytopathology, SUNY Downstate Medical Center</td>
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<tr>
<td>Rhonda Osborne, MD</td>
<td>Chief - Ultrasound, Department of Radiology, Long Island College Hospital</td>
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<td>Belur S. Chandramouli, MD</td>
<td>Chief of Nuclear Medicine, Department of Radiology, Long Island College Hospital</td>
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<tr>
<td>Perminder S. Parmar, MD</td>
<td>Assistant Professor, Chief of Head and Neck Surgery, Department of Otolaryngology, SUNY Downstate Medical Center</td>
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<td>Boris Bentsianov, MD</td>
<td>Chief of Laryngology, Department of Otolaryngology, Long Island College Hospital</td>
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<td>Shawn Ciecko, MD</td>
<td>Clinical Instructor, Department of Otolaryngology, Long Island College Hospital</td>
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<tr>
<td>Michael Singer, MD</td>
<td>Instructor, Department of Otolaryngology, Medical College of Georgia, Augusta, GA</td>
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The First Annual Head & Neck Symposium: Thyroid Surgery

AGENDA

7:30–8:30 AM  Registration & Breakfast

8:30–9:00 AM  Welcome - Dominick Stanzione CEO, Long Island College Hospital
               Richard M. Rosenfeld, MD, MPH

9:00–11:00 AM Session One
               Moderator: Shawn Ciecko, MD

9:00–9:30 am  Pre-operative Endocrine Work-up
               Vladimir Privman, MD

9:30–10:00 am Thyroid Radiology
               Deborah Reede, MD

10:00–10:30 am Thyroid Pathology
                Teresa Alasio, MD

10:30–11:00 am Thyroid Sonography
                Rhonda Osborne, MD

11:00–11:30 am BREAK

11:30–12:15 pm Session Two
               Moderator: Krishnamurthi Sundaram, MD

11:30–12:15 pm Thyroid Surgery: Well-differentiated Thyroid Cancer
               Ashok R. Shaha, MD

12:15–12:45 pm Substernal Goiter
               Gady Har-El, MD

12:45–1:45 pm LUNCH

1:45–2:15 PM  Post-operative Nuclear Medicine Management
               Belur Chandramouli, MD

2:15–2:45 PM  Post-operative Complications
               Boris Bentsianov, MD

2:45–3:30 PM  Panel Discussion: Controversies in Thyroid Surgery
               Moderators: Antonio Alfonso, MD, Krishnamurthi Sundaram, MD, Perminder S. Parmar, MD

3:30–4:00 PM  BREAK

4:00–5:30 PM  Session Four
               Moderator: K. Sundaram, MD

4:00–4:30 PM  Minimally Invasive Thyroid Surgery
               Michael Singer, MD

4:30–5:00 PM  Office Based Ultrasound
               Shawn Ciecko, MD

5:00–5:30 PM  Medullary Thyroid Cancer
               Perminder S. Parmar, MD

5:30 PM       Closing Remarks
The First Annual Head & Neck Symposium: Thyroid Surgery

Ashok Shaha, MD, keynote speaker

Conference attendees

Krishnamurthi Sundaram, MD, Conference Chair and attendees

L to R: Ashok Shaha, MD, keynote speaker, Gady Har-El, MD, faculty, Shawn Ciecko, MD, faculty, Krishnamurthi Sundaram, MD, Conference Chair, Perminder Parmar, MD, faculty and Dominick Stanzione, CEO

L to R: Krishnamurthi Sundaram, MD, Conference Chair, Ashok Shaha, MD, invited speaker and Antonio Alfonso, MD

Richard M. Rosenfeld, MD, MPH, Professor and Chairman, giving his closing remarks
## Grand Rounds 2010-2011

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<td>Antique Medical Instruments</td>
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<td>Chronic Rhinosinusitis: An Immunologist’s Perspective</td>
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<td>New Innovations: Surgical Case Logs</td>
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<td>Head and Neck Tumor Board</td>
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<td>Patient Care Competency Work Hours</td>
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<td>Eric E. Smouha, MD</td>
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<td>Fluid Dynamics Vascular Theory</td>
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<td>Abraham Shulman, MD</td>
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<td>Perminder Parmar, MD</td>
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<td>Evidence Based Otitis Media</td>
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<td>Core Clinical: Chronic Draining Ear</td>
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<td>Matthew Hanson, MD</td>
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<td>Skull Base/Robotic Surgery</td>
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<td>7:00-7:50</td>
<td>Spiros Manolidis, MD</td>
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<tr>
<td>Mortality &amp; Morbidity Conference</td>
<td>9/23/10</td>
<td>8:00-8:50</td>
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<tr>
<td>Head and Neck Tumor Board</td>
<td>9/23/10</td>
<td>9:00-9:50</td>
<td>Gady Har-El, MD, K. Sundaram, MD</td>
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<td>Richard Alexis, MD, Deborah Reede, MD</td>
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<td>Frank Dipillo, MD, Alan Schulsinger, MD</td>
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<tr>
<td>Resident – Faculty Mentor Session</td>
<td>9/30/10</td>
<td>6:30-7:00</td>
<td>S. Chandrasekhar, MD</td>
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<tr>
<td>Aural Atresia</td>
<td>9/30/10</td>
<td>7:00-7:50</td>
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<td>Medical Student Presentation</td>
<td>9/30/10</td>
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<td>CSF Leaks</td>
<td>9/30/10</td>
<td>8:20-8:50</td>
<td>Matthew Hanson, MD</td>
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<td>New Innovations: Surgical Case Logs</td>
<td>10/7/10</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD, Jessica Lim, MD</td>
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<td>Review of Endoscopic Pediatric Airway Management</td>
<td>10/7/10</td>
<td>7:00-7:50</td>
<td>Michael Rothchild, MD</td>
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<td>AAO-HNS Clinical pediatric Guideline</td>
<td>10/7/10</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
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<td>10/14/10</td>
<td>6:30-7:00</td>
<td>Michael Rothchild, MD</td>
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<td>Learning to Become an Otolaryngologist</td>
<td>10/14/10</td>
<td>7:00-7:50</td>
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<td>Journal Club</td>
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<td>Head and Neck Tumor Board</td>
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<td>CANCELED – 3rd Annual NYC Pediatric Airway Symposium</td>
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<td>Core Clinical: Work-up and Mgmt of OSA</td>
<td>10/28/10</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Pediatric Nasal Tumors</td>
<td>10/28/10</td>
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<td>Sanjay Parikh, MD</td>
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<td>Head and Neck Tumor Board</td>
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<td>Core Competencies: Communication &amp;</td>
<td>11/4/10</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD, Jessica Lim, MD</td>
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<td>Interpersonal Skills</td>
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<td>Velopharyngeal Incompetence</td>
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<td>Eli Grunstein, MD</td>
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<td>11/18/10</td>
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<td>Robert Ward, MD</td>
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<td>CANCELED – THANKSGIVING DAY</td>
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<td>Core Competencies: Systems-Based Practice, ACGME Resident Survey</td>
<td>12/2/10</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD, Jessica Lim, MD</td>
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<td>Sialoendoscopy – The Cornell Experience</td>
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<td>7:00-7:50</td>
<td>Ashutosh Kacker, MD</td>
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<td>Head and Neck Tumor Board</td>
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<td>CANCELED – MATCH INTERVIEW</td>
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<td>Coclia</td>
<td>12/16/10</td>
<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Imaging Patients with Cutaneous Malignancies</td>
<td>12/16/10</td>
<td>7:00-7:50</td>
<td>Deborah Reede, MD</td>
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<td>Surgical Management of OSA</td>
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<td>Jessica Lim, MD</td>
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<td>In-service on Percutaneous Tracheostomy With Blue Rhino System</td>
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<td>Frank Potucek, MBA</td>
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<td>Research Review</td>
<td>12/23/10</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Audiology: How to Evaluate Children Of all Ages</td>
<td>12/23/10</td>
<td>7:00-7:50</td>
<td>Stuart Motechin, MS</td>
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<td>Morbidity &amp; Mortality Conference</td>
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<td>Gady Har-El, MD, K. Sundaram, MD, Richard Alexis, MD, Deborah Reede, MD, Frank Dipillo, MD, Alan Schulsinger, MD</td>
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<td>Resident – Faculty Mentor Session</td>
<td>12/30/10</td>
<td>6:30-7:00</td>
<td>Heather Grossman, MD</td>
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<td>Coagulopathy in Pediatrics</td>
<td>12/30/10</td>
<td>7:00-7:50</td>
<td>C. Mascarinas, MD</td>
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<td>Esophageal Disorders/Dysphagia</td>
<td>12/30/10</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD, Jessica Lim, MD</td>
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<td>Residency Goals and Objectives</td>
<td>1/6/11</td>
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<td>Zenker’s Diverticulum</td>
<td>1/6/11</td>
<td>7:00-7:50</td>
<td>Marika Fraser, MD</td>
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<td>Head and Neck Tumor Board</td>
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<td>9:00-9:50</td>
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<td>CANCELED – MATCH INTERVIEW</td>
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<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Immunotherapy for Allergic Disease</td>
<td>1/20/11</td>
<td>7:00-7:50</td>
<td>William Reisacher, MD</td>
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<td>Morbidity &amp; Mortality Conference</td>
<td>1/20/11</td>
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<td>ACGME Mock Resident Survey Review</td>
<td>1/20/11</td>
<td>9:00-9:50</td>
<td>Richard Rosenfeld, MD, Jessica Lim, MD</td>
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<td>Residency Program Feedback Session</td>
<td>1/27/11</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
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<td>Event</td>
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<td>Sleep Apnea 101</td>
<td>1/27/11</td>
<td>7:00-7:50</td>
<td>Leonard Novarro, MD</td>
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<td>Preparation for the Oral Board Exam</td>
<td>1/27/11</td>
<td>8:00-8:30</td>
<td>Perminder Parmar, MD</td>
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<tr>
<td>Recognizing Signs of Fatigue</td>
<td>1/27/11</td>
<td>8:30-8:50</td>
<td>Jessica Lim, MD</td>
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<tr>
<td>Head and Neck Tumor Board</td>
<td>1/27/11</td>
<td>9:00-9:50</td>
<td>Gady Har-El, MD K. Sundaram, MD Richard Alexis, MD Deborah Reede, MD Frank Dipillo, MD Alan Schulsinger, MD</td>
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<tr>
<td>CANCELED – AUDITORY AURAL SCHOOL CONFERENCE</td>
<td>2/3/11</td>
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<td>Research Review</td>
<td>2/10/11</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Radiation Tissue Damage: The Role of Hyperbaric Oxygen Therapy</td>
<td>2/10/11</td>
<td>7:00-7:50</td>
<td>Edward Golembe, MD</td>
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<td>Preparation for the RRC Site Visit</td>
<td>2/10/11</td>
<td>8:00-8:50</td>
<td>Frank E. Lucente, MD</td>
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<td>Head and Neck Tumor Board</td>
<td>2/10/11</td>
<td>9:00-9:50</td>
<td>Gady Har-El, MD K. Sundaram, MD Richard Alexis, MD Deborah Reede, MD Frank Dipillo, MD Alan Schulsinger, MD</td>
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<td>Coclia</td>
<td>2/17/11</td>
<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<tr>
<td>Mohs Surgery</td>
<td>2/17/11</td>
<td>7:00-7:50</td>
<td>Dan Siegel, MD</td>
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<td>Rehabilitation of the Facial Nerve</td>
<td>2/17/11</td>
<td>8:00-8:50</td>
<td>G. Mashkevich, MD</td>
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<td>Recognizing and Dealing with Fatigue</td>
<td>2/17/11</td>
<td>9:00-9:30</td>
<td>Jessica Lim, MD</td>
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<tr>
<td>Core Clinical</td>
<td>2/24/11</td>
<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Microvascular Free Tissue Transfer For Defects of the Scalp and Lateral Temporal Bone</td>
<td>2/24/11</td>
<td>7:00-7:50</td>
<td>Marita Teng, MD</td>
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<td>Morbidity &amp; Mortality Conference</td>
<td>2/24/11</td>
<td>8:00-8:50</td>
<td>Gady Har-El, MD K. Sundaram, MD Richard Alexis, MD Deborah Reede, MD Frank Dipillo, MD Alan Schulsinger, MD</td>
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<td>Head and Neck Tumor Board</td>
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<td>Gady Har-El, MD K. Sundaram, MD Richard Alexis, MD Deborah Reede, MD Frank Dipillo, MD Alan Schulsinger, MD</td>
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<td>Core Competencies: Patient Care</td>
<td>3/3/11</td>
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<td>Richard Rosenfeld, MD Sal Ruggiero, DDS, MD Jessica Lim, MD</td>
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<td>Osteoradionecrosis</td>
<td>3/3/11</td>
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<td>Sal Ruggiero, DDS, MD</td>
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<td>In-service Review</td>
<td>3/3/11</td>
<td>8:00-8:50</td>
<td>Marina Boruk, MD</td>
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<td>3/10/11</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Eyelid Reconstruction</td>
<td>3/10/11</td>
<td>7:00-7:50</td>
<td>A. Parhiscar, MD</td>
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<td>Journal Club</td>
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<td>Coclia</td>
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<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Local Reconstruction after Mohs Surgery</td>
<td>3/17/11</td>
<td>7:00-7:50</td>
<td>Richard Westreich, MD</td>
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<td>Lip Reconstruction</td>
<td>3/17/11</td>
<td>8:00-8:50</td>
<td>Christina DiLoreto, MD</td>
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<td>Recognizing and Dealing with Fatigue</td>
<td>3/17/11</td>
<td>9:00-9:30</td>
<td>Jessica Lim, MD</td>
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<td>Core Clinical</td>
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<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Auricular Reconstruction</td>
<td>3/24/11</td>
<td>7:00-7:50</td>
<td>Sydney Butts, MD</td>
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<td>Morbidity &amp; Mortality Conference</td>
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<td>Resident – Faculty Mentor Session</td>
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<td>Laser and Chemical Peel</td>
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<td>K. Tarashansky, MD</td>
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<td>Roman Shinder, MD</td>
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<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
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<td>Practice-based Learning &amp; Improvement</td>
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<td>Jessica Lim, MD</td>
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<td>Diagnosis of Benign Laryngeal Disease</td>
<td>4/7/11</td>
<td>7:00-7:50</td>
<td>J Silverman, MD</td>
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<td>Board Review</td>
<td>4/7/11</td>
<td>8:00-8:50</td>
<td>Marina Boruk, MD</td>
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<td>Research Review: COSM Presentations</td>
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<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Lasers and Laryngology</td>
<td>4/14/11</td>
<td>7:00-7:50</td>
<td>Jared Wasserman, MD</td>
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<td>4/21/11</td>
<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Leukoplakia</td>
<td>4/21/11</td>
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<td>Neil Prufer, MD</td>
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<td>4/21/11</td>
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<td>Jonathan Cohen, MD</td>
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<td>Core Clinical</td>
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<td>Boris Bentsianov, MD</td>
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<td>Speech Therapy in Patient Parkinsons</td>
<td>4/28/11</td>
<td>7:00-7:50</td>
<td>D. Nascimento, MS</td>
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<td>Richard Alexis, MD Deborah Reede, MD</td>
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<td>Frank Dipillo, MD Alan Schulsinger, MD</td>
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<tr>
<td>Core Competencies: Professionalism,</td>
<td>5/5/11</td>
<td>6:30-7:00</td>
<td>Richard Rosenfeld, MD</td>
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<td>Interpersonal and Communication Skills</td>
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<td>Jessica Lim, MD</td>
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<td>Benign Lesion of the Oral Cavity</td>
<td>5/5/11</td>
<td>7:00-7:50</td>
<td>Anita Konka, MD</td>
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<td>5/5/11</td>
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<td>Research Review</td>
<td>5/12/11</td>
<td>6:30-7:00</td>
<td>Nira Goldstein, MD</td>
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<td>Journal Club</td>
<td>5/12/11</td>
<td>7:00-7:50</td>
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<td>5/12/11</td>
<td>8:00-8:50</td>
<td>Richard Rosenfeld, MD</td>
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<td>Head and Neck Tumor Board</td>
<td>5/12/11</td>
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<td>Gady Har-El, MD K. Sundaram, MD Richard Alexis, MD Deborah Reede, MD Frank Dipillo, MD Alan Schulsinger, MD</td>
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<td>Coclia</td>
<td>5/19/11</td>
<td>6:30-7:00</td>
<td>Perminder Parmar, MD</td>
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<td>Prognostic tumor markers in well differentiated thyroid cancer</td>
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<td>Temporal Bone Resection</td>
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<td>Morbidity &amp; Mortality Conference</td>
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<td>Core Competencies: Systems-based Practice, ACGME Resident Survey</td>
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<td>Middle Ear Disease in New Zealand</td>
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Otolaryngology Residents
July 1, 2010 - June 30, 2011

Fifth Year Otolaryngology

Haidy Marzouk, MD
College: New York Institute of Technology – 2001
Medical School: SUNY – Health Science Center at Brooklyn – 2006
Internship: SUNY – Health Science Center at Brooklyn – 2007

Roni Keller, MD
College: SUNY – Binghamton University – 2000
Medical School: SUNY – Health Science Center at Brooklyn – 2006
Internship: SUNY – Health Science Center at Brooklyn – 2007

Gennadiy Vengerovich, MD
College: New York University – 2001
Medical School: SUNY – Health Science Center at Brooklyn – 2006
Internship: SUNY – Health Science Center at Brooklyn – 2007

Fourth Year Otolaryngology

David H. Burstein, MD
College: University of Pennsylvania – 2003
Medical School: New York University School of Medicine – 2007
Internship: SUNY – Health Science Center at Brooklyn – 2008

Sherry Fishkin, MD
College: Brandeis University – 2002
Medical School: New York Medical College – 2007
Internship: SUNY – Health Science Center at Brooklyn – 2008

Christopher Mascarinas, MD
College: Stony Brook University – 2002
Medical School: SUNY - Health Science Center at Brooklyn – 2007
Internship: SUNY – Health Science Center at Brooklyn - 2008

Third Year Otolaryngology

Behrad Aynehchi, MD
College: University of California, Berkeley - 2004
Medical School: Temple University School of Medicine – 2008
Internship: SUNY – Health Science Center at Brooklyn – 2009

Jonathan Cohen, MD
College: University of South Carolina – 2002
Medical School: Medical University of South Carolina College of Medicine – 2008
Internship: SUNY – Health Science Center at Brooklyn – 2009

Marika Fraser, MD
College: SUNY - Binghamton – 2004
Medical School: SUNY - Health Science Center at Brooklyn – 2008
Internship: SUNY – Health Science Center at Brooklyn - 2009
Second Year Otolaryngology

Christina Di Loreto, MD
College: New York University – 2000
Medical School: Boston University School of Medicine – 2009
Internship: SUNY – Health Science Center at Brooklyn – 2010

Anita Konka, MD, MPH
College: Princeton University – 2001
Medical School: Tulane University School of Medicine – 2009
Internship: SUNY – Health Science Center at Brooklyn - 2010

Miguel Mascaro, MD
College: Cornell University – 2005
Medical School: SUNY – Health Science Center at Brooklyn – 2009
Internship: SUNY – Health Science Center at Brooklyn – 2010

First Year Otolaryngology

Scott Harris, MD
College: SUNY – Binghamton University - 2006
Medical School: Drexel University College of Medicine – 2010
Internship: SUNY – Health Science Center at Brooklyn - 2011

Colleen Plein, MD
College: Northwestern University - 2006
Medical School: University of Chicago The Pritzker School of Medicine – 2010
Internship: SUNY – Health Science Center at Brooklyn - 2011

Vikram Saxena, MD
College: Lehigh University – 2006
Medical School: Columbia University College of Physicians and Surgeons - 2010
Internship: SUNY – Health Science Center at Brooklyn – 2011

Incoming Residents (Starting July 1, 2011)

Marisa Ann Earley, MD (as PGY-2)
College: Gettysburg College - 2006
Medical School: University of Medicine and Dentistry of New Jersey – 2010
Internship: University of Medicine and Dentistry of New Jersey – 2011

Niv Mor, MD (as PGY-3)
College: Brandeis University - 1995
Medical School: SUNY at Buffalo - 2009
Internship: Geisinger Medical Center - 2010
Residency: Geisinger Medical Center – 2011 (PGY-2)

Sean Lewis, MD
College: Ohio State University - 2007
Medical School: Wright State University, Boonshoft School of Medicine - 2011
Internship: SUNY – Health Science Center at Brooklyn – 2012

Punam Thakkar, MD
College: City University of New York - Brooklyn College - 2007
Medical School: SUNY - Health Science Center at Brooklyn - 2011
Internship: SUNY – Health Science Center at Brooklyn – 2012

Jason Wasserman, MD
College: New York University - 2007
Medical School: Jefferson Medical College of Thomas Jefferson University - 2011
Internship: SUNY – Health Science Center at Brooklyn – 2012
Graduating Residents – June 2011

The three residents who graduated from our training program in 2011 have moved on to further training and practice opportunities.

Haidy Marzouk, MD, enters private practice as an Associate in Great Neck, NY.

Roni Keller, MD enters private practice as an associate in Long Island, NY.

Gennadiy Vengerovich, MD enters private practice at Maimonides Medical Center and is a member of The Department of Otolaryngology. He also has clinical faculty affiliation with SUNY Downstate Hospital Department of Otolaryngology.
Resident Graduation 2011

L to R: Gennady Vengerovich, MD, graduating resident, Roni Keller, MD, graduating resident, Richard M. Rosenfeld, MD, MPH, Professor and Chairman and Haidy Marzouk, MD, graduating resident

Jessica W. Lim, MD, Director of Residency Training

Boris Bentsianov, MD, recipient of the Faculty Teaching Award, with the graduating residents

Marina Boruk, MD, and her husband, Boris

Mr. Kalief Thornton, recipient of the Most Dedicated Staff Award, with the graduating residents

Gady Har-El, MD, recipient of the Faculty Teaching Award, with the graduating residents
A glance at the graduation dinner which was held at The Water Club

Frank E. Lucente, MD, former chairman, presenting gifts to the graduating residents

Roni Keller, MD, graduating resident and her husband, Wayne

LICH office staff (L to R: Alina Vayner, Susan Vainberg and Lana Lyulko)

Resident Behrad Aynehchi, MD (L) and David Burstein, MD (R)

Dennis Lee, MD a 1997 alumnus (L) and Frank E. Lucente, MD (R)

L to R: Residents, Marika Fraser, MD, Jonathan Cohen, MD, Anita Konka, MD and Sean Lewis, MD

A glance at the graduation dinner which was held at The Water Club

Christopher Mascarinas, MD and his wife, Peggy
## Resident Rotation Schedule (Academic Year 2010-2011)

### 2010

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<tr>
<th>Month</th>
<th>KCHC/SUNY</th>
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<th>LICH</th>
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### Department of Otolaryngology

Resident Rotation Schedule (Academic Year 2011-2012)

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Residency Experience

The Department of Otolaryngology offers a fully accredited residency program that provides education and experience in surgery, inpatient and outpatient clinical care, basic sciences and research as they relate to diseases of the head and neck. The practice of otolaryngology—head and neck surgery is an exciting one, as it involves aspects of medicine, pediatrics, neurology, neurosurgery, ophthalmology, plastic surgery, and surgery. It is a specialty inclusive of all age groups from newborns with congenital anomalies to the very aged with profound hearing losses or head and neck tumors. Many of those conditions treated by the otolaryngologist-head and neck surgeon require periodic examinations with extended follow-up, so that the patient-physician relationship becomes more established.

Some practitioners in otolaryngology-head and neck surgery concentrate in specific areas, such as laryngology, neurotology, rhinology, pediatric otolaryngology, facial plastic surgery, skull base surgery, or head and neck oncology. Others emphasize the medical or the surgical aspects of head and neck problems, including allergy, immunology, and communicative disorders. This broad mix of patients, medical disorders, and surgical challenges makes otolaryngology an exciting and rewarding specialty.

Each resident develops skill and knowledge of all aspects of modern otolaryngology. Practice experience in private, governmental, and municipal hospitals is blended to give the trainee a quality learning experience. Individual supervision and teaching are provided at all levels of training. Participation in the clinics and operating rooms is commensurate with the trainee’s level of competence and ability. Ample clinical material is available, ensuring graduated resident responsibility. A basic science program is strategically placed at the beginning of the trainee’s education in otolaryngology—head and neck surgery. This didactic and laboratory experience is heavily weighted in histopathology and temporal bone dissection.

High priority is given to educating medical students that rotate within the department. Students elect to spend from two weeks to two months on the service. Residents participate actively in a coordinated program designed to furnish the students with a basic core of knowledge and understanding of the discipline. Outpatient clinics, ward rounds, operating room exposure, and special seminars are the foundation of their learning.

The rare combination of diverse practice settings and a single training program serving a population of more than 3 million inhabitants of Brooklyn and Staten Island makes the SUNY Downstate Residency Training Program a unique opportunity for exposure to all aspects of Otolaryngology.

PROGRAM CORE

The Otolaryngology Residency is five years. The first year is coordinated with the SUNY-Downstate Medical Center Departments of Surgery, Anesthesiology, Emergency Medicine and Neurosurgery, with whom we have had a productive working relationship for many years. The excellent training provided by those departments is an integral part of the program designed to prepare the contemporary otolaryngologist-head and neck surgeon. The following four years are spent almost exclusively in the Department of Otolaryngology.

There are a total of 15 residents, with three residents accepted each year through the National Resident Matching Program. The training program is designed to provide graduated responsibility, culminating in an intensive and tailored Chief Residency year. There is full attending physician supervision in clinics, inpatient care and operating rooms in all affiliated hospitals.

Residency Training – Progression of Resident Responsibilities

The resident training program consists of five years of progressive training in otolaryngology.

The PGY-1 year in otolaryngology includes clinical and didactic activities that prepare residents to (a) assess, plan, and initiate treatment of adult and pediatric patients with surgical and/or medical problems, (b) care for patients of all ages with surgical and medical emergencies, multiple organ system trauma, soft tissue wounds, nervous system injuries and disease, and peripheral vascular and thoracic injuries, (c) care for critically-ill surgical and medical patients in the intensive care unit and emergency room settings, (d) participate in the pre-, intra-, and
post-operative care of surgical patients, and (e) understand surgical anesthesia in hospital and
ambulator care settings, including anesthetic risks and the management of intra-operative
anesthetic complications.

The training in this year is managed by the Departments Otolaryngology in coordination with
the Departments of Surgery, Anesthesiology, Emergency Medicine, and Neurosurgery. This
year includes the following rotations, as mandated by the ACGME Program Requirements for
Graduate Medical Education in Otolaryngology:

1. A minimum of 5 months of structured education in at least three of the following: general
surgery, thoracic surgery, vascular surgery, pediatric surgery, plastic surgery, surgical
oncology.
2. One month of structured education in each of the following four clinical areas: emergency
medicine, critical care unit (intensive care unit, trauma unit or similar), anesthesia,
neurological surgery.
3. An additional maximum of 3 months of otolaryngology head and neck surgery is optional,
and any remaining months of the PGY-1 year may be taken on the clinical services listed
above.

Rotations take place at LICH, KCHC, and UHB as described below:
• LICH rotations: general surgery, vascular surgery (encompassed in general surgery), and
surgical oncology
• KCHC rotations: general surgery and trauma, emergency medicine, critical care unit (SICU),
neurosurgery, and otolaryngology
• UHB rotations: general surgery, thoracic surgery, vascular surgery (encompassed in general
surgery), pediatric surgery (encompassed in general surgery), neurosurgery, and otolaryngology

Typical Procedures Performed During RY-1

- physical examination
- ACLS (Advanced Cardiac Life Support)
- ATLS (Advanced Trauma Life Support)
- oxygen administration
- bag-valve mask device usage
- closed chest compression
- oropharyngeal and nasopharyngeal airways
- phlebotomy
- peripheral intravenous lines
- Foley catheter placement
- arterial blood gas sampling
- nasogastric tube placement
- thoracentesis
- central line placement
- lumbar puncture
- management of a lumbar drain
- basic wound management
- incision and drainage of simple abscesses, including peritonsillar
- basic suturing of uncomplicated (non-facial, non-hand) lacerations
- splinting of strains and sprains
- flexible nasal and nasopharyngeal endoscopy
- flexible laryngoscopy
- fine needle aspiration in the neck
- insertion and management of tracheotomy tubes
- foreign body removal from the ear, nose and pharynx
- anterior and posterior nasal packing

The PGY-2 year in otolaryngology includes two four-month rotations at Long Island College
Hospital and one four-month rotation at Kings County Hospital Center. This PGY-2 year is
directed to the development of clinical abilities, the taking of otolaryngological histories,
performing physical examinations, and learning special techniques, leading to the identification
and treatment of common conditions encountered in otolaryngology. The Basic Science
Program, during the first two months of the resident year, reinforces basic science application
to the clinical practice of otolaryngology-head and neck surgery. The lectures, in addition to
temporal bone dissection and head and neck gross anatomy dissection, are provided by full-time
and part-time faculty of otolaryngology and other medical school faculty.

The clinical rotation includes eight months at LICH and four months at UHB/KCHC. The
resident participates in the outpatient clinical care of both pediatric and adult populations. An
introduction to hearing and speech evaluation/therapy is provided by the audiology and speech
faculty. The resident also participates in specialty clinics, such as pediatric, otology and head
and neck oncology.
Typical Surgical Procedures Performed During RY-2

- Closed Reduction Nasal Fracture
- Intranasal Antrotomy
- Excision Preauricular Sinus
- Turbinectomy
- Tracheotomy
- Myringotomy and Tube
- Split Thickness Skin Graft
- Full Thickness Skin Graft
- Excision Skin Lesions, Primary Closure
- Direct Laryngoscopy – Diagnostic
- Direct Laryngoscopy and biopsy
- Laryngoscopy with Excision
- Reduction Facial Fractures
- Mandibular Fracture Reduction – Closed
- Adenoidectomy
- Tonsillectomy
- T & A

The PGY-3 year in otolaryngology includes one four-month rotation at Long Island College Hospital, one four-month rotation at the Brooklyn VA Medical Center and one four-month rotation at Kings County Hospital Center. Increasing responsibilities are reflected in performing inpatient consultations, and in teaching of medical students and residents of other programs. Broad clinic patient responsibility and refinement of diagnostic and treatment skills are continued in the junior year.

Knowledge of work-up and differential diagnosis for complex diseases related to otolaryngology is required, such as acoustic neuroma, Ménière’s disease, diseases of the thyroid gland, allergy mediated disease, and unknown primary cancer of the head and neck. Residents gain experience in open reduction of facial fractures, removal of foreign bodies from the upper aerodigestive tract, pediatric endoscopy and laser procedures, tympanoplasty, excision of salivary glands, frontal and ethmoid sinus surgery, regional skin flaps, radical neck dissection, total laryngectomy, and cosmetic facial surgery.

Typical Surgical Procedures Performed During RY-3

- Endoscopic Maxillary Antrostomy and Ethmoidectomy
- Excision of Cysts (Globulomaxillary, Nasoalveolar)
- Tympanoplasty – Type 1
- Thyroglossal Duct Cyst Excision
- Congenital Cyst Excision
- Partial Neck Dissection
- Submandibular Gland Excision
- Lip Shave
- Hemiglossectomy, simple
- Excision other Nasopharyngeal Tumor
- Lip Wedge Resection, 1st Closure
- Local Resection Cancer Mouth
- Incision & Drainage Neck Abscess
- Cervical Lymph Node Biopsy
- Repair Complex Facial Lacerations
- Reduction Facial Fractures – Nasal
- Reduction Facial Fractures – Malar
- Reduction Facial Fractures – Orbital Blowout
- Reduction Facial Fractures – Mandibular-open
- Pedicle Flap Procedures – Local
- Pedicle Flap Procedures – Regional
- Endoscopic Sinus Surgery
- Nasal Polypectomy
- Caldwell Luc
- Esophagoscopy – Diagnostic with Foreign Body Removal
- Esophagoscopy – Diagnostic with Structure Dilation
- Bronchoscopy – Diagnostic
- Panendoscopy (Multiple Concurrent Endoscopic Procedures)

The PGY-4 year in otolaryngology is divided into one four-month rotation at Maimonides Medical Center, one four-month rotation at Kings County Hospital Center and one four-month rotation in Research based at Long Island College Hospital. The resident has substantial responsibility in administration and in teaching junior otolaryngology residents. Also, at this stage, he or she develops knowledge and experience with various medical and surgical complications and their management.

The fourth-year otolaryngology resident is in charge of performing elective and emergency in-house consultations. The resident also develops awareness of rehabilitation techniques and procedures pertaining to otolaryngology. During this year, the resident gains more experience with parotidectomy, modified neck dissection, composite resection, sphenoidectomy, mastoidectomy, stapedectomy, endolymphatic sac shunt, maxillectomy, rhinoplasty, rhytidectomy, blepharoplasty, otoplasty, correction of congenital deformities, facial nerve decompression, and removal of nasopharyngeal tumors.
The PGY-4 resident is expected to use the experience of this year to prepare for the Chief Resident experience.

**Typical Surgical Procedures Performed During RY-4**

- Canaloplasty
- Tymanoplasty II-IV (without Mastoidectomy)
- Modified Radical Mastoidectomy
- Radical Mastoidectomy
- Ossiculoplasty (independent procedure)
- Tymanoplasty with Mastoidectomy
- Simple Mastoidectomy
- Transnasal approach to the sella
- Closure of Pharyngostome
- Transantral Ligation of Vessels
- Orastral Fistula Repair
- Choanal Atresia Repair
- Uvulopalatopharyngoplasty
- Excision of Simple Tumor of Nose
- Cricopharyngeal Myotomy
- Tissue Expander, placement and management
- Lingual Tonsillectomy
- Pedicle Flap Procedures-Mycutaneous
- Lymphangioma excision
- Parathyroidectomy
- Thyrotomy (Laryngofissure)
- Vertical Hemilaryngectomy
- Supraglottic Laryngectomy
- Pharyngeal Diverticulectomy
- Modified Neck Dissection, primary
- Excision with Flap Reconstruction
- Lateral Rhinotomy
- Superficial Parotidectomy
- Composite Resection of Primary in Floor of Mouth, Alveolus, Tongue, Buccal Region,
- Tonsillectomy, radical
- Mandibular Resection (independent procedure)
- Excision Pinna
- Surgical Speech Fistula Creation
- Arytenoidectomy, Arytenoidopexy
- Thyroid Lobectomy
- Subtotal Thyroidectomy
- Total Thyroidectomy
- Cervical Esophagostomy for Feeding
- Major Vessel Ligation
- Branchial Cleft Cyst Excision
- Vocal Cord Injection
- Laser Laryngoscopy
- Bronchoscopy-Diagnostic with Foreign Body Removal
- Bronchoscopy-Diagnostic with
- Stricture Dilation
- Dermabrasion
- Brow Lift
- Liposuction
- Reduction Facial Fractures – Frontal
- Otoplasty
- Rhinoplasty
- Mentoplasty
- Blepharoplasty
- Maxilla-Le Fort I
- Maxilla – Le Fort II
- Rhytidectomy
- Scar Revision
- Frontoethmoidectomy
- External Ethmoidectomy
- Frontal Sinus Trephine
- Endoscopic Sinus Surgery with
  sphenoidotomy and frontal sinosotomy

The **PGY-5 year in otolaryngology** training (the chief resident) includes one four-month rotation at Long Island College Hospital (administrative chief resident), one four-month rotation at Kings County Hospital Center and one four-month rotation at Brooklyn VA Medical Center. The chief resident has administrative responsibility for all aspects of patient care. The resident gains wide exposure to the following concepts: chemotherapy and radiation therapy for treatment of patients with cancer of the head and neck, cancer immunology laryngotracheal reconstruction and skull base surgery. The chief resident develops broad experience with the following surgical procedures: partial and total laryngectomy, tracheal resection and reconstruction, total parotidectomy, parathyroidectomy, temporal bone resection, mediastinal resection, craniofacial resection, orbital decompression, neck dissection and composite resection, complicated reconstructive problems of the head, neck and face, neuro-otology (including middle cranial fossa surgery, Meniere's disease), cochlear implantation, skull base surgery, and major pediatric otolaryngological surgery.

The chief resident participates actively in teaching medical students, paramedical personnel, and junior otolaryngology residents. The chief resident also has major responsibility for assuring that the numerous consults received from other services are handled accurately and expeditiously and that attendings are fully informed and consulted on all patient care and administrative matters which occur at night and on the weekends. Chief residents also are
responsible for exploring clinical research projects and stimulating other members of the team to explore research opportunities.

All Chief Residents (and PGY-4 at Maimonides) are responsible for preparation of material for monthly M&M/PI/CQI conferences in the required format. This includes presentation of data on patient volume (in-patient and out-patient), on-going issues in clinic and inpatient services, interaction with other services, NYPORTS, equipment and service needs, transfusions/rational, complications, morbidities, mortalities and changes in procedures mandated by the above.

- Total Parotidectomy with facial nerve preservation
- Parapharyngeal Space Tumor Excision
- Rhinectomy
- Maxillectomy
- Maxillectomy with Orbital Exenteration
- Excision Tumor Ethmoid and Cribriform Plate
- Temporal Bone Resection
- Laryngopharyngectomy
- Repair Laryngeal Fracture
- Pharyngoesophagectomy
- Tracheal Resection with Repair
- Major Vessel Repair
- Parotidectomy with Nerve Graft
- Excision Angiofibroma
- Transsternal Mediastinal Dissection
- Scalene Node Biopsy
- Facial Nerve Graft, Repair or Substitution
- Microsurgical Free Flap
- Skull Base Resection - Lateral
- Excision of Paraganglioma of Neck and Skull Base
- Laryngoplasty
- Tracheoplasty
- Fascial Sling Procedures
- Pharyngeal Flap
- Mediastinoscopy
- Pharyngogastric Anastomosis (Gastric Pull-Up)
- Skull Base Resection – Anterior
- Skull Base Resection – Middle
- Temporalis Muscle Transfer
- Composite Graft
- Osteoplastic Frontal Sinusectomy
- Frontal Sinus Ablation
- Radical Pan-Sinusectomy
- Dacryocystorhinostomy
- Cleft Lip Repair
- Cleft Palate Repair
- Reconstruction Congenital Aural Atresia
- Reconstruction External Ear
- Maxilla-LeFort III
- Stapedectomy
- Facial Nerve Decompression
- Repair of Perilymphatic Fistula
- Endolymphatic Sac Operation
- Labyrinthectomy
- Resection Cerebellopontine Angle Tumor

All residents participate in the numerous educational programs of the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) Triological Society, New York Head and Neck Society, and various New York Metropolitan residency programs. In addition, each resident is expected to have two active clinical research projects underway at any given time. The faculty provides supervision of these projects and encourages completion of manuscripts for publication and presentation at national and/or regional meetings.

Training in Otolaryngology Allergy, and Immunology
Training in otolaryngologic allergy and immunology includes the following:
- Series of lectures given by the Section on Allergy and Immunology of University Hospital of Brooklyn at Long Island College Hospital.
- Combined Allergy-Rhinology Clinic at LICH
- Participation in programs of American Academy of Otolaryngic Allergy (AAOA) (residents are encouraged to join).
- Series of lectures by the chairman on otolaryngologic aspects of AIDS.
- Close clinical working relationship with LICH and SUNY faculty in allergy and immunology.
- Inclusion of discussion of allergic and immunologic aspects of otolaryngologic disease during routine conferences.
- Use of AAO-HNS educational material in allergy/immunology including selected SIPacs, Monographs, and Home Study Courses.
- Directed reading assignments on allergy/immunology topics.

Training in Otology
Training in otology is very broad-based and comprehensive, including the following activities:
- Good volume of otologic surgical cases at all institutions with extensive preoperative,
intraoperative, and postoperative discussions of all aspects of patient care. There are experienced otologic surgeons at all hospitals.

- Grand Rounds lectures on otologic topics in a concentrated block.
- Selected Grand Rounds conferences with multiple guest speakers and problem case presentations.
- Weekly otologic teaching conducted by Dr. Matthew Hanson, Dr. Abraham Shulman, and Dr. Neil M. Sperling, with extensive case discussions.
- Series of conferences/lectures given annually by the chairman covering all aspects of the external ear. Participation in otologic educational programs in the New York Metropolitan area. In most years, the metropolitan area departments hold a “NY Otology Update” conference.
- Directed reading assignments on otologic topics. Use of AAO-HNS educational materials in otology, including SIPacs, Monographs and Home Study Course readings.
- Importantly, the department opened a state-of-the-art Temporal Bone and Microdissection Laboratory at LiCH in early 1994. The laboratory has 8 dissection stations with video monitors and an instructor’s station with video camera. Every year, all residents participate in dissection courses conducted by members of the full-time, part-time, voluntary staff, and guest otologists.

**Training in Endocrinology**

Training in endocrinology includes the following activities:

- Extensive discussion on teaching rounds and in the operating rooms about the numerous patients who present with endocrine disorders or who require endocrine surgery.
- Special Grand Rounds lectures and conferences on topics such as thyroid disease, parathyroid disease, diabetes, etc. These conferences involved colleagues from related clinical and basic science departments.
- Numerous surgical cases are performed in conjunction with the Department of Neurosurgery which has a special interest in transsphenoidal hypophysectomy.
- Use of AAO-HNS educational materials and selected reading in endocrinology.
- Close working relationship with endocrinologists at all hospitals.

**Training in Neurology**

Training in neurology includes the following activities:

- Discussion of the neurologic aspects of various otolaryngologic disorders in the operating room, clinics, and teaching rounds.
- Close working relationship with the Department of Neurosurgery with whom a Skull Base Surgical Center has been created at LiCH and SUNY and with whom we perform numerous surgical procedures.
- Interactive research projects with Richard Kollmar, PhD in the Department of Cell Biology

**Organization of Teaching Services and Clinics**

The teaching service at each of the 4 sites (5 hospitals) is under the direction of a full-time staff member:

- Downstate UHB at Central Brooklyn: Richard Rosenfeld
- Downstate UHB at Long Island College Richard Rosenfeld
- Hospital: Richard Rosenfeld
- Kings County Hospital Center: Matthew Hanson
- Brooklyn VA Medical Center: Michael Weiss
- Maimonides Medical Center: Michael Weiss

This physician is responsible for determining standards for the delivery of clinical care, defining and coordinating the intramural educational program, assuring that all institutional regulations are followed, monitoring resident progress, coordinating the activities of the attending staff and reporting promptly and accurately to the chairman on all departmental details.

The service chief recruits and supervises the attending staff, plans the intramural conference schedule, plans the operating room and clinic schedules and assures that there is a proper balance between service responsibilities and educational opportunities for the residents. All surgery is performed under attending supervision and all clinics have attending coverage. The chairman is present every week at the three major hospitals and makes periodic on-site visits to
the other two hospitals. He also holds carefully structured meetings with the service chiefs from each institution bimonthly to assess the progress of clinical and educational programs.

**Basic Science Education**

The Chairman, Program Director, and Associate Program Director, in conjunction with the full-time staff, the Director of Communicative Disorders and the Director of Research, have planned a multifaceted program for basic science education which includes the following:

- Introductory basic science conferences directed toward the first-, second- and third-year residents for 2 hours each week during July-September.
- Special targeted seminars are held approximately quarterly to integrate basic science and clinical topics (such as thyroid function and thyroid surgery).
- Didactic instruction in biostatistics, epidemiology, and basic science research by Richard Rosenfeld, Nira Goldstein, and Richard Kollmar.
- Monthly research conference that reviews current faculty and resident projects and monitors resident planning for the research rotation
- Protected 4-month research rotation during the PGY-4 year in which the focus on basic science aspects or research experience are stressed.
- Numerous interactive projects with colleagues in Anatomy, Physiology, and Cell Biology Departments at SUNY.
- Use of basic science educational material prepared by AAO-HNS.

Attending rounds are conducted by the Socratic method. Knowledge of basic sciences, including anatomy, physiology, biochemistry, microbiology and pathology are stressed in a way in which they can be related to direct patient care.

**Laboratory Facilities**

A New York State accredited Research Laboratory is located at SUNY-Downstate and available to members of the Department of Otolaryngology.

A seven-station temporal bone dissection laboratory is also located at UHB-Long Island College Hospital. This state-of-the-art facility is the main laboratory for the department’s regular basic course in otologic surgery for the residents.

There is a two station temporal bone laboratory located at Kings County Hospital. This is intended to be a supplementary laboratory to be used by the residents rotating through UHB.

A comprehensive animal laboratory is also located at SUNY-Downstate. The Brooklyn VA Medical Center also has an animal care facility and laboratory, which provides another potential site for research projects and funding.

**Scientific and Academic Computing Center**

The Scientific/Academic Computing Center (S/Acc) located in the Basic Science Building at SUNY, aids students, staff, and faculty by offering formal courses, information, instruction and individual consultations. The staff offers these consultations in a wide area of computer applications, including how to use the Center’s computers and other facilities, statistical analysis, data acquisition, analysis techniques, research methodology, and mathematical/analytical methods.

**Resident Rotations**

During the five years of otolaryngology training, residents rotate through the following hospitals:

<table>
<thead>
<tr>
<th>PGY-1</th>
<th>Surgery (5 months, in at least 3 of the following: general, vascular, oncology, thoracic, pediatrics and plastics.)</th>
<th>1 month in each of the following: Anesthesia (LICH), Critical Care (KCHC), Emergency Medicine (KCHC), and Neurosurgery (KCHC)</th>
<th>Otolaryngology at LICH (2 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY-2</td>
<td>KCHC/UHB</td>
<td>LICH</td>
<td>KCHC/UHB</td>
</tr>
<tr>
<td>PGY-3</td>
<td>LICH</td>
<td>BVAMC</td>
<td>KCHC/UHB</td>
</tr>
<tr>
<td>PGY-4</td>
<td>Research (LICH)</td>
<td>Maimonides</td>
<td>KCHC/UHB</td>
</tr>
<tr>
<td>PGY-5</td>
<td>LICH</td>
<td>BVAMC</td>
<td>KCHC/UHB</td>
</tr>
</tbody>
</table>
**Didactic Teaching Program**

**Grand Rounds**

Grand Rounds are held every Thursday at the Long Island College Hospital site. All house staff, students, research fellows and faculty are required to attend. Basic science topics are presented during the first part of the program. The second part is devoted to clinical topics. There are frequent guest lecturers from the New York Metropolitan area as well as from throughout the United States and abroad. All conferences provide ample opportunity for active participation by residents, students and attending staff members.

**Morbidity and Mortality/Quality Improvement**

Monthly departmental meetings are scheduled to discuss issues related to quality improvement, performance improvement and morbidity/mortality. This important process involves all department members in an effort to improve individual, departmental, interdisciplinary and system activities in rendering quality patient care. Focusing on the quality activities of all five affiliated hospitals provides a coherent departmental-wide program. These conferences always include a systems-based practice approach, with identification of the roles of all members of the health-care team and identification of any institutional or system issues.

**Resident Presentations**

Twice a year each resident gives a formal presentation on a basic science or clinical subject at Grand Rounds. The resident is expected to choose a faculty adviser to assist with topic selection, format determination and possible manuscript preparation. The presentations may be a part of a research project and submission to local, regional and national meetings.

**Otolaryngology Conference - Kings County Hospital Center**

The Otolaryngology Conference takes place on a weekly basis in the office of the Department of Otolaryngology. The content of didactic and bedside teaching is based upon clinical material related to patients treated at Kings County Hospital and University Hospital of Brooklyn. The resident presents the case, and the discussion is led and supervised by the attending physician. An attempt is made to integrate the clinical material from the standpoint of diagnosis, treatment, and didactic teaching. Operative cases are presented both before and following surgery. The minutes of the conferences are recorded by the senior resident.

**Otolaryngology-Radiology Conference**

1st Tuesday of each month at LICH: Otolaryngology case review and temporal bone imaging conference. A resident case presentation is the precursor to the thorough review of an otologic problem. Clinical data with emphasis on the imaging studies is reviewed. Management options are discussed in detail.

**Radiology and Pathology**

Radiology and pathology conferences are held regularly every month within the context of the Grand Rounds conference. Basic overview of imaging and pathology as well as interesting cases in the head and neck are presented. Discussion and teaching is facilitated by experienced head and neck radiologists and pathologists.

**Combined Head and Neck Oncology**

Twenty four times a year, the Departments of Oncology, Otolaryngology, Radiology, Radiation Therapy and Pathology meet at LICH to discuss recent head and neck cancer patients and selected topics in head and neck cancer. A similar conference is held weekly at the Brooklyn Veterans Administration Medical Center. A combined otolaryngology/radiation oncology/medical oncology Tumor Board is held at SUNY-UHB/KCHC once a month; all head and neck cancer cases are presented for treatment planning.

**Multidisciplinary Endocrine Surgery Conference**

This Multidisciplinary Endocrine Surgery Conference takes place once every two months on a Thursday morning at the Long Island College Hospital site. The conference is dedicated to diseases of the thyroid and parathyroid glands. Our residents prepare cases for discussion by endocrinologists, radiologists, pathologists and head and neck surgeons.
Cochlear Implant Conference
Cochlear Implant Conference 3rd Tuesday of each month at LICH: Cochlear Implant Team meeting. A multidisciplinary team including audiologists, speech pathologists, social workers and otolaryngologists discuss current issues of cochlear implantation. Individual cases are reviewed in detail to determine candidacy. Progress reports and outcomes of prior implants are also discussed.

Basic Science Lecture Series
During the summer, a 9-week basic science and communicative disorders course is given for 1st, 2nd and 3rd year residents, with senior resident attendance encouraged. Held on Thursday mornings, the first hour is devoted to basic anatomic, physiologic, radiologic and pharmacologic aspects of otolaryngology - head and neck surgery. The second hour is devoted to topics in clinical otolaryngology, audiology and speech and language pathology.

BVAH Hospital Otolaryngology Conference
Conferences involving the attending and the otolaryngology residents assigned to the BVAH take place twice a week (usually on Tuesday afternoon and Friday morning). Consultations are reviewed, problem cases are presented, and surgical cases for the week are reviewed. Patients with severe disabling tinnitus are seen by the attending every Friday morning and integrated into the conference. Topics discussed at these conferences consist primarily of general otolaryngology, otology, nose and sinus surgery.

BVAH Head and Neck Conference
Weekly (Thursday afternoon) Head and Neck Conferences are held at the BVAH. The conference is attended by the residents and attendings on the otolaryngology team as well as the resident and attending staff of the Department of Surgery, Head and Neck Service. There is a multidisciplinary group of physicians, radiologists, oral surgeons, oncologists and radio-therapists. Patients are presented both before and following therapy. The statistics of the Tumor Registry Board of the BVAH are reviewed specifically for cases of head and neck oncology.

COCLIA Review Course
Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) is a teaching tool to help residents learn otolaryngology-head and neck surgery. This study guide provides discussion questions for over 100 major otolaryngology topics. Residents meet monthly to review the questions and learn from each other.

Communicative Disorders
A set of in-service meetings have been established by the Division of Communicative Disorders for the residents of otolaryngology. Topics covered include basic audiology, immittance audiometry, evoked potentials, hearing loss, hearing aids, head and neck disorders, laryngectomy and rehabilitation and dysphagia.

Temporal Bone Dissection Course
The department maintains a state-of-the-art temporal bone microdissection laboratory at the LICH campus: residents attend a program over 2 weekends each year of their training. Early course work stresses anatomy and embryology, followed by intensive dissections and surgical technique practice. Dr. Neil Sperling and Dr. Matthew Hanson, along with other faculty members, guide the resident through this important and valuable educational program. Temporal bones are also available for resident self-study and dissection.

Journal Club
On a monthly basis, the current literature is reviewed in a journal club format. Review of the literature is important for keeping up-to-date with the ever-changing world of medicine. The Journal Club format helps residents learn how to analyze research fundamentals and new material, allowing them to draw their own conclusions. Reading the literature also helps create interest in specific research ideas and stimulates discussion and controversy.
Home Study Course
The Home Study Course, offered by AAO-HNS, includes current reprints. This course emphasizes both classic and current studies in otolaryngology-head and neck surgery. The course consists of compendia published in four sections a year, beginning each September. A self-assessment examination is provided after each section and scored for credit. All residents participate in this course, with the registration fee paid by the Department of Otolaryngology at SUNY Downstate.

In-Training Examination (Annual Otolaryngology Resident Examination)
Weekly conferences involving all members of the residency staff are held from January to April of each year up to and including the week before the American Board of Otolaryngology In-Training Examination for Residents. The conference takes place in the LICH library, and is attended by available members of the residency staff. Supervision is by an attending who is present at the request of the resident staff and is available for consultation. Topics from past examinations are reviewed to allow more comprehensive coverage of all aspects of the specialty of Otolaryngology - Head and Neck Surgery. The library setting allows for immediate availability of reference material as well as audio/visual equipment.

Mock Oral Board Examinations
Approximately 4 times annually the department will conduct a mock oral board examination session as part of the grand rounds schedule.

Special Evening Meetings
Four times a year, the New York Head and Neck Society hosts a Wednesday evening lecture series devoted to a particular issue. Local, national and international authorities are invited to speak. All residents are invited and sponsored by our department.

Suggested Readings
Specific reading requirements by training year are given under the “Medical Knowledge” competency sections in the “Goals and Objectives” document. In addition, it is expected that residents implement a systematic reading schedule to prepare for the annual Otolaryngology Training Examination each spring. The goal of the reading schedule should be to cover all material in a general otolaryngology textbook (e.g. Bailey’s) at least once annually, even if only superficially. More in-depth and focused reading should occur progressively as the resident advances in training.

Research Expectations
All residents in the PGY-2 through PGY-5 years are expected to present a research project at the annual Frank E. Lucente Resident and Alumni Research Day in June.
Research projects may consist of (a) case series and chart reviews, (b) systematic reviews or meta-analyses of the literature, (c) planned observational research, (d) survey research or projects, or (e) experimental research (basic science or clinical trials).
A resident should be able to identify an area of study and specific questions to be addressed. The resident should be able to develop an investigative plan in the form of a research protocol, which will address the questions to be answered (i.e. retrospective vs. prospective) and explain their limitations. One should be able to design and implement a study. One should also be able to critique study design, methodology, statistical analysis and interpretations in both their own work as well as journal publications.
Residents are expected to work independently. Faculty members are available as advisors to provide guidance and direction.

Designated Research Time
Four months of protected research time is available to all residents during the PGY-4 year of otolaryngology training.
Research is part of the ACGME core competency on practice-based learning and improvement (PBLI). Please refer to the “Goals and Objectives” document for a description of research expectations in the PGY-4 year under the PBLI subheading.
Research must be done at SUNY-Downstate, LICH, or Brooklyn VA. Research may be basic
science or clinical. Work may be performed in any department as long as the work is done in one of the approved institutions and a member of the full time Otolaryngology faculty must be one of the research advisors.

Residents are encouraged to develop projects that can be completed during the allotted research time. Cost factors are also important in determining whether a protocol is approved.

Undesignated Research Time

All residents are expected to take advantage of the large clinical volume available to them. A clinical issue to study prospectively should be identified during the first three years of training. With the assistance of an otolaryngology faculty member, a protocol is then written and submitted to the Otolaryngology research committee for approval. Subsequent approval by the institution research review board may also be required. After approval of a protocol, the study should be performed without interfering with other clinical responsibilities.

A retrospective study using the clinical material available at any or all affiliated institutions should also be performed during the regular clinical assignments. Again, a protocol should be written and approved by the research committee prior to incurring any expense.
Service Chief Reports

Division of Pediatric Otolaryngology
Ari J. Goldsmith, MD, Chief

The Division of Pediatric Otolaryngology, now in its 19th year of existence, has maintained continued excellence in patient care, teaching, and research for the 2010-2011 academic year. Access to top-notch pediatric anesthesia and support services remain a critical aspect of our success.

This past year the Division has shown substantial clinical growth from the efforts of Sydney Butts, MD, who has laid the groundwork for a cleft and craniofacial center, and from the addition of Joshua Silverman, MD, PhD, who is fellowship-trained in both pediatrics and laryngology. Dr. Silverman has built a thriving practice in record time, focusing on pediatric voice and airway disorders. With five full-time pediatric otolaryngologists in the department, we are now the largest division in the tri-state area.

Research and publication remain strong priorities within the Division. Peer-reviewed manuscripts were published in Otolaryngology – Head & Neck Surgery, International Journal of Pediatric Otorhinolaryngology, and Archives of Otolaryngology-Head & Neck Surgery. National involvement remains strong. Nira Goldstein, MD, MPH, completed her term as chair of the ASPO Research Committee and Richard Rosenfeld, MD, MPH, began his 5th year as Editor-in-Chief of Otolaryngology – Head and Neck Surgery. In addition, Dr. Rosenfeld was named President of ASPO in April, 2011.

Along with the Otolaryngology Department in general, the Pediatric Division celebrated the Third Annual Frank E. Lucente Alumni and Resident Research Day at Long Island College Hospital. Our invited speakers, Sony Malekzadeh, MD, Educational Coordinator-Elect for the AAO-HNS, and Dennis Lee, MD, MPH, alumnus and pediatric otolaryngologist helped make the program an unqualified success.

Division of Facial Plastic and Reconstructive Surgery
University Hospital of Brooklyn at LICH
Richard Westreich, MD, Chief

Sydney C. Butts, MD, Chief

The Division of Facial Plastic and Reconstructive Surgery, under the direction of Dr. Richard Westreich, performed over 200 plastic and reconstructive surgeries during the past academic year. There was an even distribution of facial plastic surgery cases including trauma surgery, post-ablative reconstruction, congenital deformity repair, functional nasal correction and cosmetic facial procedures. Active facial plastic surgery services and on-call coverage were maintained at all of the affiliate hospitals and several satellite office sites.

During the past academic year, attending and resident papers were published on assessments of facial asymmetry and nasal deviation. Resident research projects in the facial analysis and nasal surgery are currently underway. Chapters and other research projects are also currently being worked upon.

The otolaryngology service has become actively involved in the management of congenital craniofacial anomalies over the past year, including several cleft lip and palate cases generated from our coverage of the busy neonatal intensive care units at SUNY Downstate, Kings County Hospital and Long Island College Hospital. Through collaboration with the NICU, general pediatrics and the pediatric subspecialties, as well as local speech/language pathologists, comprehensive and multidisciplinary care is brought to these patients.

During the Downstate/Kings County rotation, the otolaryngology service provides coverage of facial trauma in a rotation schedule with the oral surgery and ophthalmology services. Over the last 12 months, over 70 facial fractures were repaired. Residents participate in formalized didactic activities relating to maxillofacial trauma during this rotation. This includes a hands-on fracture plating workshop at the start of the Downstate/Kings County rotation lead by Dr. Butts. Senior residents are sent to participate in maxillofacial trauma courses sponsored by the AO. Dr. Butts has been involved with maxillofacial trauma education on a national level as a faculty member of the AO and will be a co-instructor of an instruction course at the 2010 annual AAO-HNS meeting on pediatric facial trauma.
Current research and clinical projects include investigations of practice trends relating to the treatment of infantile hemangiomas and a review of the presentation and management of sinonasal lesions in the pediatric population. Dr. Butts is serving as the section editor of both the otolaryngology and maxillofacial trauma sections of the Atlas of Pediatric Emergency Medicine for which several of the faculty and residents are contributing co-authors.

Drs. Westreich, Butts, and Parhiscar have worked together to develop a comprehensive facial plastic surgery resident curriculum, which is scheduled on a two year cycle. Resident lectures, attending lectures, and case presentations are incorporated into the didactics. A compendium of articles which complements these lectures is distributed to each resident and updated periodically. Guest lectures from individuals with areas of specific expertise are also included.

In summary, the Division of facial plastic surgery continues to provide residents and medical students with significant exposure to cosmetic and reconstructive procedures of the face. Our recent staff additions have provided continuity and helped to preserve the volume of cases critical to resident training. We expect further growth over the next few years in all aspects of the subspecialty.

**Division of Otology and Neurotology**

Matthew B. Hanson, MD, Director

The Division of Otology and Neurotology provides sub-specialized care for patients with diseases of the ear and temporal bone. In striving for optimal outcomes for our patients, their care is carefully coordinated with our colleagues in the Division of Communicative Disorders, where accurate diagnosis relies on advanced technology. Our Skull-Base team for treatment of neuro-otologic disorders includes colleagues in head and neck surgery and neurosurgery. Continued growth has occurred in providing advanced care for the hearing impaired, including cochlear implantation, bone-anchored hearing implants, and early detection of hearing loss. Newborn hearing screening is routine at our participating hospitals and regularly identifies hearing loss at the youngest possible age. This enables early intervention to foster language development. Otology education is supplemented by the careful and precise study of the temporal bone anatomy. The Temporal Bone Laboratory provides intensive training for all residents during each of their four years. Our laboratory is also available for post-graduate training. Routine educational conferences in otology take place through the Grand Rounds schedule, as well as during weekly Temporal Bone Radiology Conferences, Vestibular conferences and weekly Case Review Conferences.

In the last year, several changes have occurred in the Division of Otology and Neurotology. Dr. Sperling has decided to step down as Director of the division to devote more time to clinical practice, but he remains an active participant in our program and the care of our patients. In addition, Dr. Tahl Colen, a graduate of our residency program and a fellowship-trained otologist, has begun to practice in Brooklyn and to do otologic cases at UHB-LICH. This brings the total to three fellowship-trained otologists affiliated with our residency program. In addition, as the result of a gift from Dr. Abraham Shulman, we are now able to offer additional advanced vestibular testing, such as rotational chair testing, at our LICH campus. Our cochlear implant programs at both UHB and LICH remain active and we continue to benefit from our close affiliation with the Auditory Oral School of New York, which provides pre- and post-operative services for our implant patients of all ages.

**Division of Head Neck Surgery and Oncology**

Krishnamurthi Sundaram MD, Clinical Professor and Chief, Head and neck and skull base surgery, Long Island College Hospital.

Perminder S. Parmar, Assistant Professor and Chief, Head and Neck Surgery, SUNY Downstate Medical Center, University Hospital of Brooklyn

The Division of Head and Neck Surgery and Oncology continues to be extremely active and productive, both clinically and academically. Drs. Sundaram, Har-El, Parmar, Butts, Hanson and Lim, continue their role in running the leading center for head and neck cancer management in Brooklyn. Patients are being referred from Brooklyn, Queens, and Staten Island. In addition, our voluntary attending staff, especially Drs. Dodaro, S. Kantu, M. Kantu, Carney, Ciecko and Finn, continue to bring their head and neck surgical cases to our institutions, benefiting from the support of the department and residents, and enriching our teaching patient volume.
Each month, the Division of Head and Neck Surgery and Oncology at Long Island College Hospital run two busy head and neck tumor boards. We have a monthly multi-disciplinary general tumor board at SUNY-Downstate/Kings County Hospital and Long Island College Hospital. There is full participation of our attending and resident staff members in all tumor board conferences. Dr. Frank Lucente contributes invaluable advice on ethical issues. Other participants include radiation oncologists, medical oncologists, radiologists, and pathologists. These dedicated tumor board sessions have been very successful in discussing difficult cases and designing treatment plans. A representative from our division participates in the Long Island College Hospital weekly, hospital-wide, general tumor board and leads the discussion on head and neck cancer patients.

Our Director of Laryngology, Dr. Boris Bentsianov’s experience and expertise in Laryngeal cancer management as well as rehabilitation of head and neck cancer patients after ablative surgery is of great benefit to our patients. This includes management and rehabilitation of their speech and swallowing functions.

Physicians in the Division of Facial Plastic and Reconstructive Surgery have been working closely with our cancer surgeons on advanced reconstructive procedures for head and neck cancer. Dr. Afshin Parhiscar has been working with us for over nine years at both Long Island College Hospital and Kings County Hospital. His experience and expertise in reconstructive surgery in general and in microvascular free tissue transfer in particular, has helped our patients tremendously. In fact, his success rate in free tissue transfer has been very impressive. Dr. Richard Westreich is the Director of the Division within the Department of Otolaryngology. His experience and expertise in management of facial skin cancer is an important part of our teaching program. Dr. Sydney Butts, a versatile facial plastic and reconstructive surgeon who recently joined Downstate has proved to be an invaluable addition to the department in caring for cancer and trauma patients. Drs. Westreich and Butts both won teaching awards this year.

As chief of the Head and Neck service at University Hospital, Dr. Perminder Parmar has striven to expand and revitalize the Head and Neck service at KCHC and UHB. His excellent surgical and teaching skills have been a great addition to the service.

With Drs. Butts and Parhiscar, the three have worked hard to establish a head and neck microvascular program at KCHC and expanded the arsenal of treatment and reconstruction options available to patients afflicted with advanced head and neck cancer in central Brooklyn. In addition, Dr. Parmar has made great strides in the creating an atmosphere of multidisciplinary collaboration with the departments of Radiation Oncology, and Medical Oncology at KCHC and UHB which has afforded patients with ease of access to comprehensive cancer care.

A recent recruit is Dr. Marina Boruk who completed a Rhinology fellowship at Vanderbilt University after a residency at Downstate. We look forward to her contributions in the management of nasal and sinus tumors.

Faculty members and residents of our department are regular participants and attendees at the meetings of the New York Head and Neck Society, which is the largest local/regional head and neck oncological organization in North America. Presentations at national meetings such as the International head and neck conferences and the annual meetings of the AAO-HNS and Triological society are a regular feature. An annual head and neck symposium is being planned for December 2010. This year the topic is Thyroid cancer.

We had also important technological additions in our operating rooms at Long Island College Hospital, SUNY-Downstate, and Kings County Hospital. First, state-of-the-art sophisticated intraoperative computerized navigation systems are available at the operating rooms in all 3 institutions. This equipment has a significant positive impact on our ability to manage skull base lesions with added patient safety. Second, we have the availability of intraoperative parathyroid hormone essay at Long Island College Hospital. This changes significantly the management of patients with primary hyperparathyroidism. Surgery is significantly shorter and post-operative hospital stay is reduced. Transoral laser microsurgery (TLM) is a standard tool in our armamentarium. Preparation to start the Transoral Robotic surgery (TORS) program is underway at University Hospital.

In collaboration with Dr. Camille Ragin from the Institute of Public Health, research is being conducted on the role of viruses, genes and environmental factors in head and neck squamous cell carcinoma in the inner city.
Division of Laryngology, Voice and Swallowing Disorders
Boris L. Bentsianov M.D., Director

The division of laryngology has been providing our patients with the latest and most advanced diagnostic and therapeutic modalities for care of voice and swallowing pathology. The practice is primarily located at the LICH offices at 134 Atlantic Ave. where we have access to a full complement of office procedures including Videostroboscopy, laryngeal EMG and EMG guided injection, Endoscopic swallow evaluation, as well as percutaneous medialization thyroplasty and awake in office laryngeal biopsy techniques. The practice has expanded over the last decade to meet the growing demand for high quality voice and larynx care throughout the community and borough with referral for tertiary care from a catchment area including Brooklyn, Queens and Staten Island. The division also includes a Monday morning laryngology clinic in collaboration with the residency program, in which resident physicians and their patients also benefit from the full complement of laryngologic instruments and procedures. The clinic allows all patients access to the highest level of laryngologic care in the private setting and allows the residents an exciting opportunity to learn and contribute in a hands on fashion.

The LICH office facility is excited to now have a full time speech pathologist with specialty interest in head and neck and voice disorders. This has provided a higher level of patient care coordination, and allow access for our resident clinic to participate in therapy activities. The speech therapy division has now allowed the highest level of outpatient swallowing evaluation including modified barium swallow diagnosis with supportive counseling and therapeutic behavior techniques for optimum patient outcomes.

The division of Laryngology is also fortunate to have a new physician member, Dr. Silverman who comes to us after fellowship training in both Pediatric Otolaryngology and Laryngology. His unique skills in pediatric airway and voice, and excellent surgical training will enhance our scope of care to the community. Dr. Silverman will also extend breath and scope of the division at our Kings County and Downstate campuses and allow more rapid access of care to voice patients in the borough. Dr. Silverman also brings an extensive research experience which he plans to continue to expand within the residency program.

The division is further enhanced by its affiliation with the Brooklyn VA hospital where we have a full Tuesday AM operating room session and Tuesday PM clinic hours for Laryngologic patients, served jointly by the otolaryngology and Speech and language departments. This collaborative evaluation of the patient allows for optimal team based care for the VA patients and allows the residents insight into the voice evaluation and therapy aspects within the subspecialty. The division is also active within the grand rounds curriculum for resident education and continuing medical education for our faculty, as well as the resident basic science course.

The division of laryngology has also been greatly benefited by its interaction with the Communicative disorders group at Brooklyn Hospital where we have collaborated with their voice trained speech and language pathologists for non-invasive therapeutic techniques for care of professional voice performers, patients with high vocal demand and neurolaryngology patients with excellent results. This aspect of our division also has facilitated in the care of post laryngectomy patients by providing this population with a host of rehabilitative options from esophageal speech teaching, to TEP care and counseling.

The division has also become more active in the operating room setting with higher case volume over each of the last several years including new microlaryngologic instruments to facilitate microsurgical vocal cord surgery and a new fiber hand held laser allowing us to expand our endoscopic options with improved precision and reliability allowing us to perform less invasive procedures with shorter recovery times and improved results.

As always, our goal is continued growth and to expand our current scope of care providing the highest level of laryngologic care to our patients and our community.
Communicative Disorders

The Division of Communicative Disorders serves infants, children, and adults with speech, language and hearing disorders. The Division has developed the first cochlear implant program in Brooklyn and Staten Island. Plans for the future include further expansion of a cochlear implant program, the development of a specialized voice and swallowing center with state of the art diagnostic and therapeutic equipment, and expanded services for head and neck cancer patients.

Audiology

Audiology services include complete diagnostic evaluations including complete audiological evaluation and immittance testing on infants, children and adults. Specialized testing includes otoacoustic emissions, cochlear implant evaluation and mapping, auditory brainstem response testing, electronystagmography, and evaluation of central auditory processing skills.

Our universal newborn hearing screening program evaluates hearing in all newborns. The goal of the program is to identify hearing loss and provide amplification and treatment before six months of age, thereby reducing the negative effects of hearing loss on speech and language development.

Counseling and referrals are available as needed.

Cochlear Implant Program

The Cochlear Implant Program at LICH is unique in that it is part of an auditory verbal therapy program. Patients who elect to have cochlear implants can receive therapy services at the same facility that performing their mapping. Experienced audiologists are available to visit schools and provide assistance.

Communicative Disorders Staff

Stuart Motechin, M.S. CCC-A  Supervisor of Audiology at Long Island College Hospital
Graduated from Brooklyn College in 1996 with a Masters in Audiology. Special interests include amplification, cochlear implants and BAHA fittings.

Laurie Caracciolo, AuD, CCC-A  Clinical Audiologist, graduated from University of Florida in 2007 with an AuD in Audiology. Special interests include: balance testing, pediatric assessment and OAE’s.

Saleh Saleh, AuD, CCC-A  Clinical Audiologist, graduated from the University of Florida January 2010 with an AuD in Audiology. Special interests include: electrophysiological testing, dizziness evaluation, tinnitus evaluation and amplification.

John Weigand, AuD, CCC-A  Director of Audiology at SUNY Downstate
Graduated from University of Florida in 2000 with an AuD in Audiology. Special interests include: amplification, electrophysiologic testing and vestibular assessment.

Danielle Nascimento, MS, CCC-SLP  Speech-Language Pathologist graduated from CUNY Hunter College in 2008 with Master’s in Communication Sciences. Special interests include: adult dysphagia, pediatric speech and language development, and voice disorders.
Research Report

In the year 2010-2011, Dr. Kollmar continued his NIH supported work on the molecular genetics of otolith formation in the zebrafish. Dr. Rosenfeld continued in his role as Editor-in –Chief of the journal Otolaryngology Head and Neck Surgery and chair of the AAO-HNS Guidelines Development Task Force that sponsored panels to develop clinical practice guidelines for hoarseness, tonsillectomy and adenoidectomy, polysomnography for sleep-disordered breathing and sudden sensorineural hearing loss. Dr. Shulman served as emeritus editor of the International Tinnitus Journal. Dr. Butts edited the otolaryngology chapter of the textbook “The Atlas of Pediatric Emergency Medicine 2nd edition” that included topics authored by several of the attendings and residents in the department. Notable publications include Dr. Aynehchi’s and Dr. Sundaram’s systematic review of laryngeal reinnervation techniques published in Otolaryngology Head and Neck Surgery, Dr. McCoul’s, Dr. Goldstein’s and Dr. Goldsmith’s study on gastroesophageal reflux treatment in children with otitis media published in Archives of Otolaryngology Head and Neck Surgery, Dr. Goldstein’s study on racial/ethnic differences in the prevalence of sleep-disordered breathing in children published in the Journal of Clinical Sleep Medicine and Dr. Rosenfeld’s Cochran Corner reviews that appear as a regular section in Otolaryngology Head and Neck Surgery.

Ongoing Research Projects

Richard M. Rosenfeld, MD, MPH
1. Practice trends among otolaryngologists treating infantile hemangiomas
2. Ethics in research publications
3. Office insertion of tympanostomy tubes in young children
4. The association between smoking, alcohol consumption, and obesity on the signs and symptoms of laryngopharyngeal reflux in a VA population
5. Systematic review of the use of perioperative steroids in thyroidectomy
6. Comparison of a single question screening to other validated tools for cancer-related fatigue in head and neck malignancies
7. Comparison of a single question screening to other validated tools for cancer-related fatigue in head and neck malignancies

Frank E. Lucente, MD
1. Priorities of otolaryngology residents when evaluating employment opportunities- a survey

Krishnamurthi Sundaram, MD
1. AHNS questionnaire regarding EMG ET tube
2. Comparison of a single question screening to other validated tools for cancer-related fatigue in head and neck malignancies
3. Voice handicap index in patients undergoing thyroidectomy using laryngeal nerve monitoring

Gady Har-El, MD
1. Scientific trends in head and neck surgery
2. Deep neck space infections

Boris Bentsianov, MD
1. The association between smoking, alcohol consumption, and obesity on the signs and symptoms of laryngopharyngeal reflux in a VA population

Sydney Butts, MD
1. Practice trends among otolaryngologists treating infantile hemangiomas
2. Bilateral vocal cord paralysis after disc battery ingestion-A report of 2 cases
3. Sinonasal Myxoma

Ari Goldsmith, MD
1. The utility of nasopharyngeal culture in the management of chronic adenoiditis
2. Management of supraglottic dysgenesis with laser supraglottoplasty
Nira Goldstein, MD, MPH
1. Inflammatory pseudotumor of the trachea treated with laser excision
2. The role of methicillin resistant staphylococcus aureus (MRSA) in otorrhea following bilateral myringotomy and tube insertion
3. The prevalence of sleep-disordered breathing in children with sickle cell disease and its association with increased cerebrovascular risk
4. Validation of a clinical assessment score for pediatric sleep-disordered breathing
5. Efficacy of adenotonsillectomy in pediatric sleep-disordered breathing
6. Management of supraglottic dysgenesis with laser supraglottoplasty
7. The prevalence of sleep disordered breathing in children with asthma and its behavioral consequences

Matthew Hanson, MD
1. HTLV associated T-cell lymphoma presenting as a sinus mass with proptosis: a case report

Richard Kollmar, PhD
1. Molecular genetics of otolith formation in the zebrafish
2. Protease inhibitors as ototoxicity protectors in the zebrafish
3. Identification of precerebellin protein candidates in zebrafish otoliths
4. Neuritogenic factors that promote outgrowth from adult spiral ganglion neurons in the mouse
5. Stem cells in the adult zebrafish

Afshin Parhiscar, MD
1. In-office intraoral approach to mentoplasty with silicone implants: a report of 110 cases

Perminder Parmar, MD
1. Bilateral vocal cord paralysis after disc battery ingestion-a report of 2 cases
2. Clear cell parathyroid adenoma-case report
3. Systematic review of the use of perioperative steroids in thyroidectomy

Abraham Shulman, MD
1. Protease inhibitors as ototoxicity protectors in the zebrafish
2. Nuclear medicine imaging & tinnitus
3. MRI of the brain & tinnitus in the KCHC clinic
4. Tympanic membrane displacement/intracranial pressure determination in tinnitus patients
5. Vestibular evoked myogenic potentials & the otoconia system
7. Mild traumatic brain injury & neurodeneration of the brain & ear
8. Ultrahigh frequency audiometry in tinnitus patients

Neil Sperling, MD
1. Predictive value of early postoperative results in stapedotomy
2. Peri-operative N-acetyl cysteine in stapedotomy
3. Pathology of the external ear

Michael Weiss, MD
1. Laryngeal cancer survival outcome after chemotherapy/radiation vs total laryngectomy

Richard Westreich, MD
1. Evaluating the effect of the subalar graft in correcting nasal axis deviation
2. Lateral nasal artery pedicled island flap

Resident Research Projects:
Haidy Marzouk, MD
1. Inflammatory pseudotumor of the trachea treated with laser excision
2. The utility of nasopharyngeal culture in the management of chronic adenoiditis
3. The role of methicillin resistant staphylococcus aureus (MRSA) in otorrhea following bilateral myringotomy and tube insertion
Roni Keller, MD
1. Ethics in research publications
2. The prevalence of sleep-disordered breathing in children with sickle cell disease and its association with increased cerebrovascular risk
3. Sinonasal Myxoma

Gennadiy Vengerovich, MD
1. Protease inhibitors as ototoxicity protectors in the zebrafish

David Burstein, MD
1. Ethics in research publications
2. Efficacy of adenotonsillectomy in pediatric sleep-disordered breathing
3. Priorities of otolaryngology residents when evaluating employment opportunities - a survey
4. Evaluating the effect of the subalar graft in correcting nasal axis deviation
5. Bilateral vocal cord paralysis after disc battery ingestion - a report of 2 cases
6. Clear cell parathyroid adenoma - a case report
7. In-office intraoral approach to mentoplasty with silicone implants: a report of 110 cases

Sherry Fishkin, MD
1. Inflammatory pseudotumor of the trachea treated with laser excision
2. Validation of a clinical assessment score for pediatric sleep-disordered breathing
3. Scientific trends in head and neck surgery
4. The prevalence of sleep disordered breathing in children with asthma and its behavioral consequences

Christopher Mascarinas, MD
1. HTLV associated T-cell lymphoma presenting as a sinus mass with proptosis: a case report
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4. Systematic review of the use of perioperative steroids in thyroidectomy
5. Practice trends among otolaryngologists treating infantile hemangiomas

Behrad Aynehchi, MD
1. Inflammatory pseudotumor of the trachea treated with laser excision
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6. Comparison of a single question screening to other validated tools for cancer-related fatigue in head and neck malignancies
7. Deep neck space infections
8. In-office intraoral approach to mentoplasty with silicone implants: a report of 110 cases

Marika Fraser, MD
1. Ethics in research publications
2. Laryngeal cancer survival outcome after chemotherapy/radiation vs total laryngectomy

Jonathan Cohen, MD
1. Ethics in research publications

Scott Harris, MD
1. Pathology of the external ear
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