

DEPARTMENT OF

OTOLOGY

STATE UNIVERSITY OF NEW YORK DOWNSTATE MEDICAL CENTER

Maimonides Medical Center

Brooklyn Veteran Administration
Medical Center

Kings County Hospital Center

University Hospital of Brooklyn

New York Methodist Hospital

ANNUAL REPORT 2015

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VISION

Our vision is a community where individuals can access optimal care for disorders of the ears, nose, throat, head and neck.

MISSION

We will bring our vision into reality through patient care, education, and research:

1. We provide **state-of-the-art medical and surgical care** to the people of Brooklyn and surrounding communities
2. We **teach current best practices for patient care** at the local, regional, national, and international level
3. We **train residents** to become leaders in the specialty and practice in diverse geographic locations and practice settings
4. We **educate medical students** and help those interested in otolaryngology to better understand the specialty and pursue a career in otolaryngology
5. We **conduct clinical, basic, and translational research** to share knowledge, identify best practices, and fill knowledge gaps
6. We **engage in volunteer service** to professional medical organizations at the local, regional, national, and international level

VALUES

We always want the community to say the following about our work:

1. We value **safe, ethical and compassionate** patient care
2. We value **teaching, research, and education** since we are first and foremost an academic department
3. We value **collaboration** and **synergy** with our colleagues, fellow specialists, and other professionals
4. We value **professionalism, responsiveness, and timely communication**
5. We value **excellence** and **quality improvement** in all endeavors



STATE OF THE DEPARTMENT 2015

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

The 2014-2015 academic year marked the 24th anniversary of the Department of Otolaryngology at the State University of New York (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), Maimonides Medical Center, SUNY at Bay Ridge Ambulatory Surgery Center (SUNY Bay Ridge), and New York Methodist Hospital (NY Methodist).

This past year was marked by growth, opportunity, and accomplishment. We maintained full ACME accreditation (without any citations) for our residency training program, were awarded a substantial new research grant from the National Institute of Health (NIH) to fund translational research, added a new facial plastic and reconstructive surgeon, performed the first transoral robotic surgery in Brooklyn, opened new faculty practice sites in Brooklyn Heights and Park Slope, and expanded our clinical services at SUNY Bay Ridge, the Brooklyn VAMC, and NY Methodist. Additional highlights appear later in this report, but these alone make the past year an unqualified success.

Mission, Vision, and Values

If you are like most readers, the chances are great that you skipped over the section of this report entitled "Mission Statement." For many years this would be no great loss, because our mission had not deviated from the following text formulated a long time ago:

1. Medical and surgical treatment for diseases of the ear, nose, throat, head, and neck
2. Diagnosis, intervention, and treatment for all communicative disorders
3. Excellence in medical student, resident, and postgraduate education
4. Pursuit of high quality scientific research and integration into residency training
5. Dissemination of otolaryngologic information to patients, their families, primary care physicians, and all members of the Brooklyn and adjacent communities

There is nothing wrong with the five time-tested goals just listed, but they are more factual, than inspirational, and reflect a rather myopic and constrained vision of what our great department is all about. At our most recent Annual Retreat, however, we took time to reconsider our department's mission, vision, and values and to craft new statements that are more in line with our current priorities. These statements are worthy of some emphasis here.

A vision statement defines what impact an organization wishes to have on society and the future of our community. The vision is aspirational, never intending to be reached, but always intending to inspire. After much deliberation, we concluded "*Our vision is a community where individuals can access optimal care for disorders of the ears, nose, throat, head and neck.*" We strive for care that is not only great, but also accessible.

A mission statement states what an organization does, who they do it for, and how and why they do it. It also sets boundaries on organizational activities. We agreed that we bring our vision into reality through patient care, education, and research:

1. *We provide state-of-the-art medical and surgical care to the people of Brooklyn and surrounding communities*
2. *We teach current best practices for patient care at the local, regional, national, and international level*
3. *We train residents to become leaders in the specialty and practice in diverse geographic locations and practice settings*
4. *We educate medical students and help those interested in otolaryngology to better understand the specialty and pursue a career in otolaryngology*
5. *We conduct clinical, basic, and translational research to share knowledge, identify best practices, and fill knowledge gaps*
6. *We engage in volunteer service to professional medical organizations at the local, regional, national, and international level*



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A *values statement* reflects the core ideology of an organization by answering “how do we carry out our mission?” This provides a values-based context for decision-making, thereby avoiding a default approach of fear-based decision-making when things get tough. We decided that we always want the community to say the following about our work:

1. We value *safe, ethical* and *compassionate* patient care
2. We value *teaching, research, and education* since we are first and foremost an academic department
3. We value *collaboration* and *synergy* with our colleagues, fellow specialists, and other professionals
4. We value *professionalism, responsiveness, and timely communication*
5. We value excellence and *quality improvement* in all endeavors

For many organizations, the mission statement is simply a document that adorns the beginning of an annual report to shareholders, provides meaningless words on the wall that no one ever reads, and is an exercise deemed futile by most of the membership. An agreed upon statement of mission, vision, and values, however, can energize a group and, most importantly, allow it to thrive despite change and challenge. I firmly believe that the words above accomplish this goal, and will bring us closer every year to realizing our vision of “a community where individuals can access optimal care for disorders of the ears, nose, throat, head and neck.”

Serving Brooklyn with Quality Care

Of the three pillars that support academic medical departments – research, teaching, and patient care – it is the ability of a department of 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 and expansion through the leadership of Sydney Butts, Alice Lin, Eli Gordin, and Richard Westreich. The division covers all aspects of facial plastic and reconstructive surgery, including maxillofacial trauma, cosmetic procedures, microvascular free tissue transfer, and reconstruction of complex defects of the head, neck, and related structures.

Head, neck, and skull-base surgery remains a focal point of our department under the leadership of Krishnamurthi Sundaram, Natalya Chernichenko, Alice Lin, and Michael Weiss, with additional expertise provided by Gady Har-El, Jessica Lim, Victor Lagmay, and voluntary faculty. Areas of continued growth include microvascular surgery, transoral robotic surgery, and minimally invasive surgery. Endocrine surgery remains a center of excellence.

Otology and neurotology remain vibrant through the leadership of Matthew Hanson and Michal Preis, with contributions from other faculty. The division offers comprehensive otologic services, ranging from ambulatory surgery to complex procedures with our neurosurgical colleagues. Abraham Shulman continues to help patients worldwide cope with tinnitus, as one of the few full-time tinnitusologists in clinical practice.

Pediatric Otolaryngology remains a highlight of the program with leadership by Nira Goldstein, Joshua Silverman, and Richard Rosenfeld, and additional contributions by Sydney Butts, Paul Vastola, Ari Goldsmith, Mauro Ruffy, and voluntary faculty. We continue to offer a full spectrum of clinical services, including advanced airway reconstruction, voice restoration, endoscopic surgery, and rehabilitative services through our cleft team for children with cleft lip, cleft palate, microtia, velopharyngeal insufficiency, micrognathia, and craniofacial syndromes.

Laryngology and neurotology are well covered under the leadership of Boris Bentsianov and Joshua Silverman, with contributions from our pediatric otolaryngologists, head and neck surgeons, and voluntary faculty. A full range of operative and office interventions are available to improve voice-related quality of life for children, adults, vocal professionals, and head and neck cancer patients.

General otolaryngology, allergy, and rhinology continue to expand through the leadership of Marina Boruk, Victor Lagmay, and many other faculty. Procedures include advanced endoscopic sinus surgery, complex image-guided procedures, office balloon sinuplasty, and in-office allergy testing and treatment, including sublingual immunotherapy. Surgery for sleep disorders includes endoscopy, transnasal surgery, palatoplasty, stiffening procedures, and transoral robotic surgery.

Communicative disorders continues to grow through the efforts of John Weigand, Sal Saleh, and their relationships with training programs that supply a steady stream of audiology interns. Patients with cochlear implants have been well served by our collaboration with the Auditory Oral School of New York, which provides state-of-the-art mapping and support services, including participation in our monthly cochlear implant team meeting.

Research, Education, and Teaching

Sydney Butts organized the annual Frank E. Lucente Alumni and Resident Research Day program, which featured keynote speaker Marion Everett Couch, from the Indiana University School of Medicine, and alumni speaker Gady Har-El, from Lenox Hill Hospital in New York. In addition to showcasing our resident and faculty research, our invited presentations included metabolic derangements in head and neck cancer, the history of skull base surgery in Brooklyn and the United States, and how to best integrate time with work and family. Please review the full Research Day Agenda later in this report for the full agenda.

Nira Goldstein continues as Director of Research, ably coordinating a rich palette of faculty, resident, and medical student projects. She is an incredible resource for navigating the intricacies of funding, IRB approval, and statistical analysis. Nira is assisted by Richard Kollmar, who serves as Director of Basic and Translational Research, and Richard Rosenfeld, who mentors residents in biostatistics, study design, and systematic review. In addition to a large number of observational studies and systematic reviews, translational work is active on restoring recurrent laryngeal nerve function after injury using a rat model, developing a zebrafish model to study perineural invasion of head and neck cancer using, and understanding the role of laryngospasm in epilepsy and pulmonary edema using a rat model. These, and other, projects are supported by grants from the National Institutes of Health, SUNY Downstate Medical Center, and the American Academy of Otolaryngology – Head and Neck Surgery Foundation.

Nicole Fraser, our educational coordinator, remains an invaluable resource as she completes her sixth year with the department. Nicole has worked with Richard Rosenfeld, program director, and Nira Goldstein, associate program director, to successfully implement the ACGME Next Accreditation System, including milestone assessments, a clinical competency committee, and a program evaluation committee. Sydney Butts has revitalized our Grand Rounds program, which has enjoyed robust attendance since transitioning several years ago to SUNY Downstate, including our pre-rounds session focused on resident issues and education.

Natalya Chernichenko and Krishnamurthi Sundaram co-directed the highly successful Fifth Annual Multidisciplinary Head & Neck Symposium, which highlighted transoral robotic surgery (TORS) and oropharyngeal cancer. The conference agenda appears later in this report and we remain grateful to Rivi and Gady Har-El for their kind support of the symposium.

Our residency training program remains fully accredited (with commendation) and continues to attract the best and brightest candidates with 100% successful attainment of employment and fellowship positions. We view our residency program as the centerpiece of our academic department, always striving to improve our responsiveness to the needs of residents and faculty.

Recognizing Our Faculty and Staff

Since our last report there have been many notable accomplishments, which are fully described in the pages that follow. Some events worthy of particular emphasis, however, are listed below.

Notable Faculty Accomplishments

- Marina Boruk was appointed Faculty Practice Physician Administrator
- Marina Boruk was invited faculty for the Rutgers Endoscopic Sinus Surgery course
- Sydney Butts was appointed Vice Chair for the Department of Otolaryngology
- Sydney Butts was awarded the SUNY Downstate President's Health Disparities Grant for "Factors associated with the prevalence of orofacial clefts in New York City."
- Sydney Butts received the KCHC Annual Doctor's Day Award
- Natalya Chernichenko was appointed to the AAO-HNS Skull Base Committee
- Nira Goldstein was Scientific Program Chair for the 2015 ASPO meeting
- Eli Gordin joined the department as a full-time faculty member after a facial plastic and reconstructive surgery fellowship at University of Texas Southwestern
- Eli Gordin was inducted into the New York Head and Neck Society
- Matthew Hanson completed six years of service on the AAO-HNS Implantable Hearing Aid Committee
- Richard Kollmar was awarded an NIH R21 grant for "Restoration of recurrent laryngeal nerve function after injury in a rat model" with co-investigators Joshua Silverman, Krishnamurthi Sundaram, and Mark Stewart
- Frank Lucente was appointed Professor Emeritus of Otolaryngology
- Niv Mor joined the full-time faculty at Maimonides Medical Center after a fellowship in laryngology with Andrew Blitzer
- Michal Preis was the voluntary faculty honoree at our Resident Graduation Dinner
- Richard Rosenfeld presented the Charles J. Krause, MD Lectureship at the Department of Otolaryngology at the University of Michigan



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- Richard Rosenfeld was awarded the Outstanding Leadership Award by the Guidelines International Network North America
- Sal Saleh was appointed Audiology Supervisor for the otolaryngology faculty practice sites in Brooklyn Heights and Park Slope
- Joshua Silverman was appointed Resident Site Director at NY Methodist Hospital
- Joshua Silverman was the full-time faculty honoree at our Resident Graduation Dinner
- Krishnamurthi Sundaram was the Site Principal Investigator for the RTOG 1216 national randomized controlled trial on advanced head and neck squamous cell carcinoma
- John Weigand and his team were honored with a Community Service Award from Downstate Medical Center for audiology screening and outreach efforts

Notable Resident, Study, and Other Accomplishments

- Jason Abramowitz had podium presentation accepted for the AAO-HNS 2015 Meeting entitled "Adverse event reporting for proton pump inhibitor therapy."
- Anthony Alessi had a podium presentation accepted for the AAO-HNS 2015 Meeting entitled "Anesthetic dependent breathing patterns and vocal fold motion in a rat model"
- Hamid Arjomandi was awarded Third Place at the Tenth Annual Metropolitan NY Resident Research Day for "A rat model of post-obstructive pulmonary edema."
- Carole Facciponti was the staff honoree at our Resident Graduation Dinner
- Dennis Lee, alumnus, established an endowment to fund the annual "SUNY Downstate Department of Otolaryngology Dr. Frank E. Lucente Resident Research Grant"
- Sean Lewis received the Triological Society John J. Conley, MD, Resident Research Award for "Systematic review for surgical treatment of adult laryngotracheal stenosis."
- Sean Lewis was appointed by the AAO-HNS Section for Residents and Fellows to serve as the Resident and Associate Society liaison for the American College of Surgeons
- Sean Lewis, Hamid Arjomandi, and Nikita Kohli represented our department at the AAO-HNS annual leadership and advocacy conference
- Colleen Plein, Punam Thakkar, and Sean Lewis were awarded Second Place in the AAO-HNS Annual Academic Bowl and Resident Competition
- Jason Wasserman became a resident member of the AAO-HNS Pan-American Committee
- The Department of Otolaryngology relocated to two, newly renovated, state of the art Faculty Practice Sites in Brooklyn Heights and Park Slope
- SUNY Downstate is actively building a seven-floor, 100,000 square foot building for the School of Public Health with space for research, simulation, and multi-purpose teaching

A Bright Future

We are delighted to welcome our three new PGY-1 residents, Daniel Ballard, from Eastern Virginia Medical School, Daniel Sukato, from the University of Pittsburgh School of Medicine, and Derek Wu, from the Albert Einstein College of Medicine.

We are proud of our three departing chief residents and wish them health, happiness, and success. Marisa Earley begins a one-year fellowship in pediatric otolaryngology at New York University, Scott Harris joins the academic otolaryngology faculty practice at the North Shore and Hofstra School of Medicine, and Colleen Plein joins an otolaryngology group practice at Aurora Healthcare, just north of Chicago.

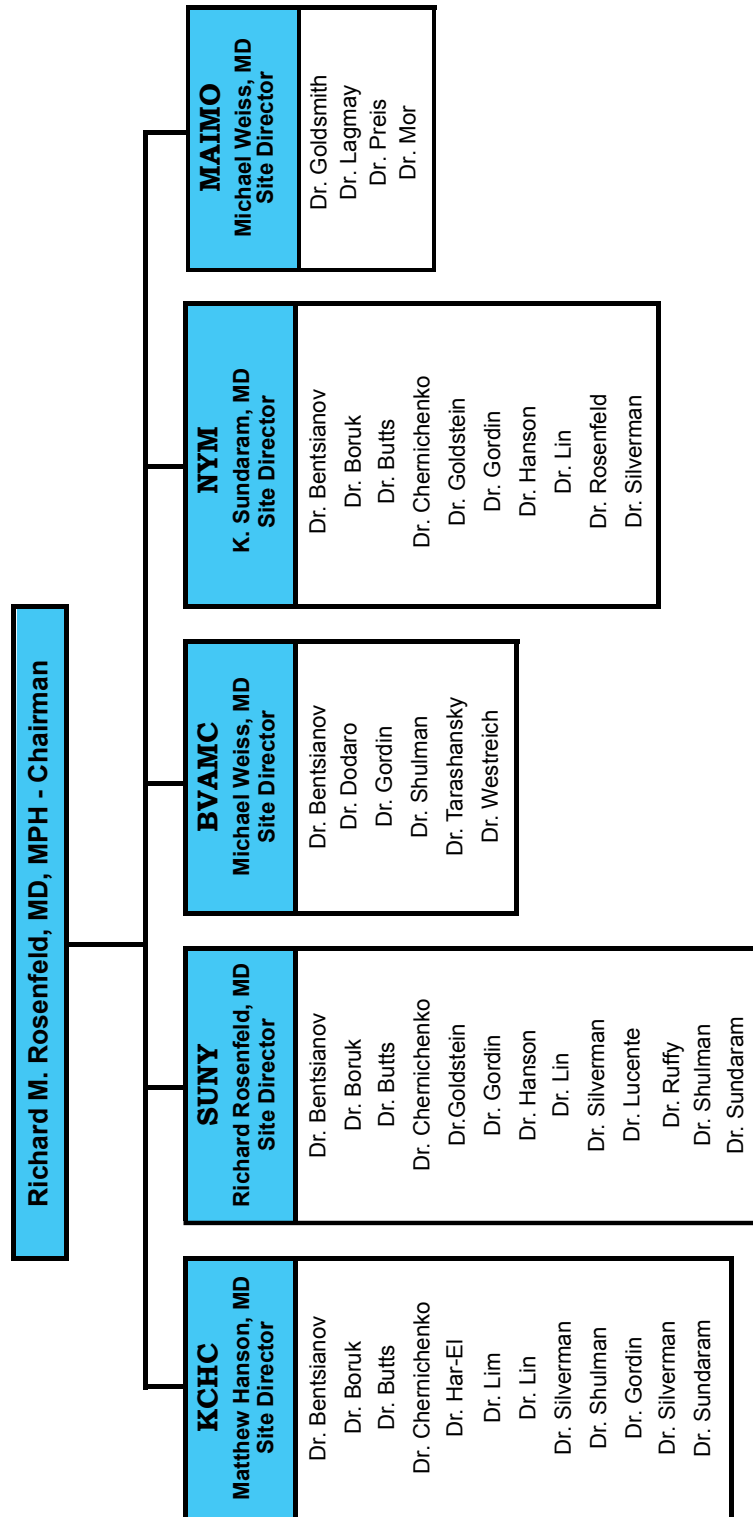
Some of our staff have already been acknowledged, but let me close by thanking our administrative miracle workers, Billy Tang at SUNY Downstate, Carole Facciponti at NY Methodist, and Svetlana Lyulko and Ruth Pacheco at our Brooklyn Heights Faculty Practice. Their efforts, along with all of our other talented support staff, help fulfill our mission of research, teaching, and patient care to the benefit of our community and all stakeholders.

I remain the perennial optimist regarding our department's future because of the wonderful patients, faculty, staff, residents, and students we are blessed to interact with daily. Moreover, Brooklyn remains one of the most exciting, diverse, and opportunity-laden locations on the planet. My pledge as chairman is to continue working tirelessly to embrace all opportunities and enhance an already wonderful department in an equally wonderful borough.

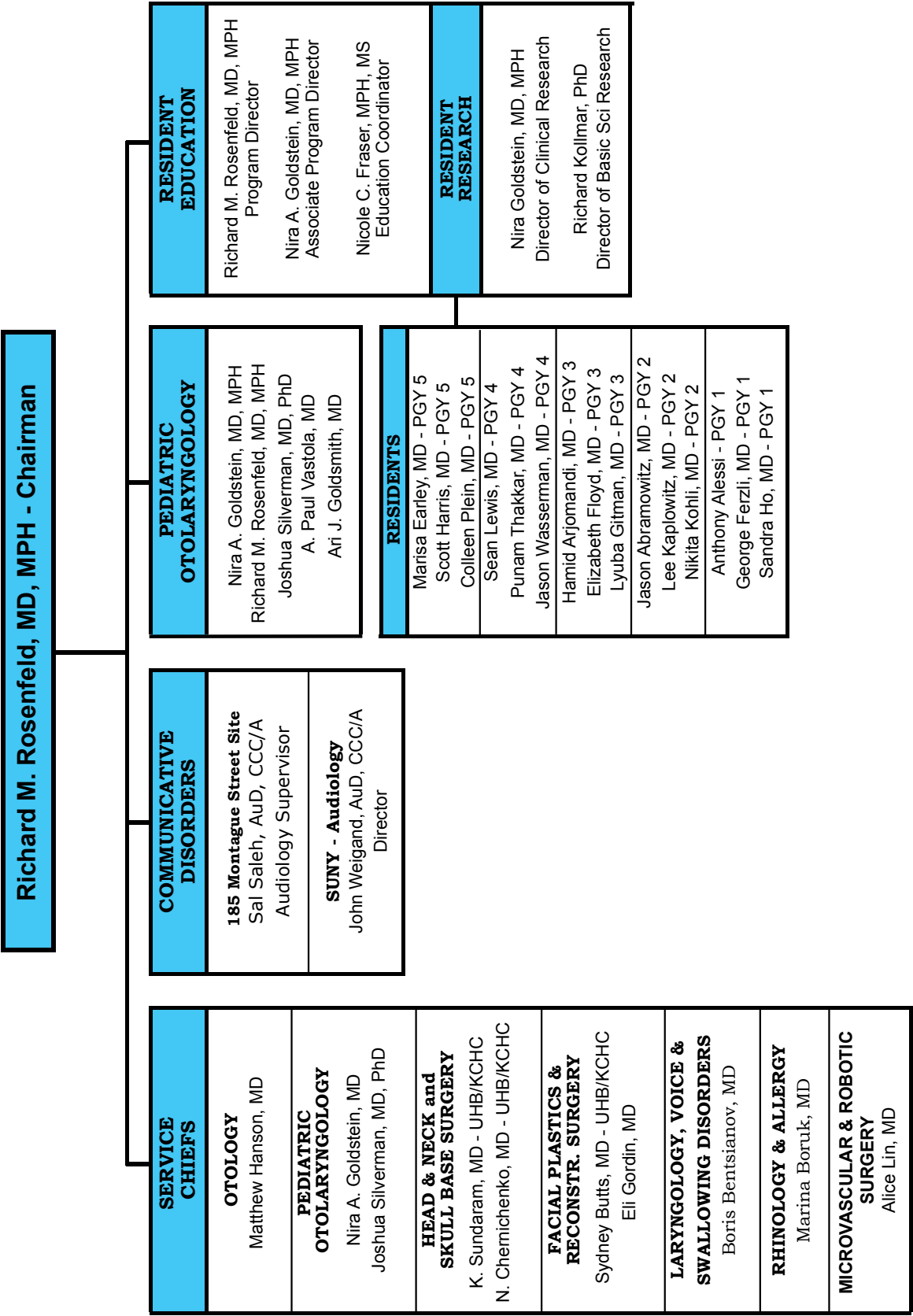
Respectfully submitted,

Richard M. Rosenfeld, MD, MPH
July 2015

TABLE OF ATTENDING STAFF FOR EDUCATIONAL PROGRAMS



DIVISIONS. RESIDENT EDUCATION, AND RESEARCH



FACULTY

The faculty of the Department of Otolaryngology is comprised of a variety of individuals who's clinical and research interests encompass the ever-increasing scope of this specialty. For the 2014 to 2015 academic year, the department had fourteen full-time academic faculty, three full-time affiliate faculty, six part-time faculty, thirty voluntary faculty and contributing physicians, two audiologists, and two PhD.

Full-Time Academic Faculty



Richard M. Rosenfeld, MD, MPH

Professor, Chairman, and Program Director of Otolaryngology at SUNY Downstate and Chairman of the Board for the Auditory Oral School of New York. Dr. Rosenfeld graduated the Otolaryngology Residency Program at Mount Sinai Medical Center and 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 AAO-HNS Distinguished Service Award (four times), the SENTAC Robert Ruben Award for Excellence in Pediatric Otolaryngology, the Guideline International Network North America Outstanding Leadership Award, and the IAPO Award for Worldwide Contributions to Pediatric Otolaryngology. Dr. Rosenfeld is the Senior Advisor for Guidelines and

Quality at AAO-HNS and has chaired numerous national committees in the AAO-HNS and ASPO. He is the author, coauthor, or editor of 5 books and over 300 scientific publications and textbook chapters, including chapters in "Bailey" and "Cummings" on understanding data and medical literature. Dr. Rosenfeld has given over 700 scientific presentations and is an international authority on guideline development, evidence-based medicine, and otitis media. He has served as president of ASPO, president of the International Society for Otitis Media, chair of the Guideline International Network North America, and editor in chief of Otolaryngology – Head and Neck Surgery. Dr. Rosenfeld has been listed in Castle Connolly's "Best Doctors in America" since 1999 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 1990 he became Chairman at SUNY-Downstate and LICH. He was 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 Triological Society and 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 has been on the Executive Editorial Board of The Laryngoscope. He is the author, coauthor or editor of 17 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 Faculty and Educational Affairs for SUNY Downstate UHB @ LICH and Director of the Medical Student Career Advisement Office at SUNY. 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

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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, skull base and larynx. From 2007 to 2013, he served as Chief of Head and Neck and Skull Base surgery in the department at Long Island College Hospital in Brooklyn. Dr. Sundaram was Vice-Chairman of the Department of Otolaryngology at UHB-LICH and SUNY Downstate Medical Center from Jan. 2007 to June 2015.

Dr. Sundaram's clinical practice is based at University Hospital of Brooklyn and the NY Methodist Hospital where he has been appointed as the residency site director from July 2013.



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. Dr. Bentsianov has grown up as a member of the Brooklyn community for the last 40 years and has been dedicated to delivering the highest quality laryngologic clinical and surgical expertise to his home community for the last decade. His research interests include neurologic disorders of the larynx, diagnosis and treatment of dysphagia and swallowing 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, endoscopic repair of CSF leak and base of skull defects as well as skull-based tumors. Dr. Boruk also has additional training in the field of allergy and provides allergy testing and immunotherapy for her patients.



Sydney Butts, MD

Dr. Butts serves as the chief of the Division of Facial Plastic and Reconstructive Surgery at University Hospital of 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. 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. Her 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 managing 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. Dr. Butts currently serves as the faculty coordinator for the Grand Rounds Program, supervising scheduling of faculty speakers and educational content. She is also the faculty coordinator for the annual Frank E. Lucente Alumni and Resident Research Day.



Natalya Chernichenko, MD

Dr. Chernichenko serves as an Assistant Professor of Otolaryngology and Chief of Head and Neck Surgery. Her clinical expertise lies in the diagnosis and management of benign and malignant tumors of the head and neck, including salivary gland, thyroid and parathyroid, oral cavity, pharynx, larynx, sinuses, skull base and skin. Her goal is to provide patients with advanced surgical care for head and neck cancer with an emphasis on quality-of-life issues. Dr. Chernichenko earned her undergraduate degree at New York University and her medical degree from SUNY Downstate Medical Center. Following a residency in Otolaryngology-Head and Neck Surgery at Yale-New Haven Hospital, Dr. Chernichenko pursued additional Head and Neck Surgical Oncology Fellowship training at Memorial Sloan-Kettering Cancer Center. Dr. Chernichenko's research interest is focused on exploring the molecular mechanisms of nerve invasion by human carcinomas with the goal of identifying novel therapeutic targets. She is a recipient of the Young Investigator Award from the American Head and Neck Society.



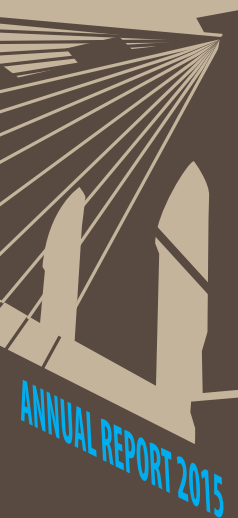
Nira A. Goldstein, MD, MPH

Dr. Goldstein, Professor of Otolaryngology, joined the Department of Otolaryngology in 1998, as a 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. She serves as the Associate Residency Program Director, Director of Medical Student Education and Director of Clinical Research in the department and Clinical Assistant Dean in the Medical School. Dr. Goldstein has authored over 40 articles and 20 chapters 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.



Eli Gordin, MD

Dr. Gordin joined SUNY Downstate in August of 2014 as an Assistant Professor of Otolaryngology – Head and Neck Surgery. He earned his undergraduate degree from the University of Pennsylvania and his medical degree from Thomas Jefferson University in Philadelphia, Pennsylvania. He completed his residency in Otolaryngology – Head and Neck Surgery at Thomas Jefferson University Hospital and subsequently completed a busy fellowship in Facial Plastic and Reconstructive Surgery under the supervision of Dr. Yadro Ducic in Dallas/Fort Worth, Texas. Dr. Gordin's clinical expertise lies in the reconstruction defects within the face, head, and neck, ranging from minor to severe, resulting from oncologic surgery, trauma, radiation, infection, and congenital malformation, including the use of microvascular free tissue transfer. Additionally he is trained in aesthetic surgery of the face and neck, including rhinoplasty, blepharoplasty, rhytidectomy, and other cosmetic procedures, as well as the excision of benign and malignant head and neck tumors. Dr. Gordin's research interests focus on the reconstruction and revitalization of prior irradiated tissue in the context reconstructive head and neck surgery. He is currently board certified by the American Board of Otolaryngology – Head and Neck Surgery.



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Matthew Hanson, MD

Dr. Matthew Hanson, Assistant Professor and Chief of Otolaryngology 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 Otolaryngology/Neurotology at The EAR Foundation/Otolaryngology Group in Nashville, Tennessee. Before coming to Downstate in 2005, he had been Director of Otolaryngology and Neurotology at Temple University School of Medicine in Philadelphia. Dr. Hanson continues to have active clinical and research interests in all aspects of Otolaryngology 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.



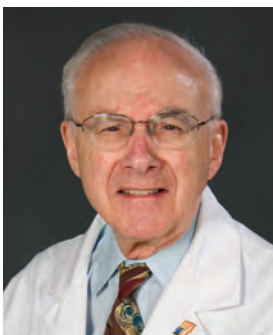
Richard Kollmar, PhD

Dr. Kollmar earned his Diploma in Chemistry at the Julius-Maximilians-Universität Würzburg, the Ludwig-Maximilians-Universität München, and the Max-Planck-Institute 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 an Associate Professor in Cell Biology and an Assistant Professor and Director of Basic Research in Otolaryngology. His first research focus is to understand the mechanisms that underlie the development and maintenance of otoliths and otoconia, from the molecular to the organismal level. His group has identified several novel otolith 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. His second research focus is to develop treatments to restore recurrent-laryngeal-nerve function after injury. This is a translational research project in collaboration with Dr. Silverman and Dr. Sundaram as well as Dr. Stewart (Physiology & Pharmacology and Neurology). Dr. Kollmar also teaches the ear lectures for CHRP students and for second-year medical students during their neuroanatomy block and provides research opportunities in his laboratory for high-school students to residents.



Alice Lin, MD

Assistant Professor and Chief of Microvascular and Robotic surgery in the Department of Otolaryngology at SUNY Downstate. Dr. Lin completed her Otolaryngology residency at Northwestern University, Feinberg School of Medicine- McGaw Medical Center. She then graduated from fellowship at Massachusetts Eye and Ear Infirmary-Massachusetts General Hospital at Harvard Medical School in Head and Neck Surgery, Microvascular Reconstruction and Skull base Surgery. She has authored and coauthored numerous scientific publications and textbook chapters and given numerous visiting lectures and scientific presentations. Her latest book chapters include a chapter on scalp reconstruction in "Facial Surgery: Plastic & Reconstructive". She has also been appointed the Assistant Director of the Center for Head and Neck Surgery and Skull Base at New York Methodist Hospital.



Abraham Shulman, M.D.

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 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. Dr. Shulman edited Tinnitus Diagnosis

and Treatment in 1991, has a new edition in preparation, and has published over 250 articles and book chapters. In 2010 SUNY/Downstate Medical Center included him in a celebration of achievement of 150 years of medical education in Brooklyn. 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, drug development for tinnitus relief for clinical types of tinnitus, and fluid dynamics of brain and ear.



Joshua B. Silverman, MD, PhD

Dr. Silverman, Assistant Professor of Otolaryngology at SUNY Downstate and Director of Pediatric Otolaryngology, 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 clinical fellowships in Pediatric Otolaryngology at Lurie Children's Hospital of Chicago, Northwestern University, followed by a Laryngology & Voice fellowship at Massachusetts Eye and Ear Infirmary, Harvard University. 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 multiple book chapters, and he is certified by the American Board of Otolaryngology.

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Full-Time Affiliate Faculty



Victor Lagmay, MD FACS

Dr. Lagmay trained in general surgery and otolaryngology at New York University Medical Center. He completed a fellowship 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 Cancer Center in Brooklyn. He is the clinical director of the Endoscopic Dysphagia Service at Maimonides Medical Center. Dr. Lagmay is board-certified in his specialty and is a Fellow of the American College of Surgeons. Dr. Lagmay maintains memberships in several professional societies, including The American Thyroid Association; The American Academy of Otolaryngology - Head and Neck Surgery; and The New York Head and Neck Society. He has been acknowledged as a Castle Connolly Top Doctor in the New York Metro Area for several years. He serves as an Honorary Police Surgeon for the City of New York.



Michal Preis, MD

Dr. Preis, Assistant Professor of Otolaryngology, graduated from the Ben Gurion University of the Negev in Israel, trained in otolaryngology at the Rabin Medical Center, and completed a fellowship in neurotology at the University of Washington in Seattle. Her clinical interests include vertigo, hearing loss, chronic ear disease, and cholesteatoma. Dr. Preis received the Research Award from Rabin Medical Center, Best Teacher Award from the University of Tel Aviv, Residents recognition from SUNY class of 2015. Her clinical practice is based at Maimonides Medical Center where she trains SUNY Downstate Otolaryngology residents in otologic surgery including mastoidectomy, tympanoplasty, ossicular chain reconstruction, endoscopic ear surgery and hearing restoration procedures.



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 cleft lip and palate surgery. He is currently in private practice.



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. He is the Director of Otolaryngology at Maimonides Medical Center, as well as the Chief of the Otolaryngology Section at the Brooklyn VA Medical Center.

Part-Time Faculty



Gady Har-El, MD

Gady Har-El, MD is a Professor of Otolaryngology and Clinical Neurosurgery at SUNY-Downstate. He is the Chief of Head and Neck Surgery and Oncology at Lenox Hill Hospital. His clinical interests include head and neck cancer, thyroid and parathyroid surgery, 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 American Broncho-Esophagological Association, the New York Head and Neck Society, and the New York Laryngological Society, and he is currently the Secretary of the American Laryngological Association. Also, he is a third time recipient of the Stanley M. Blaugrund

Award for Excellent Teaching from the New York University. He has been listed in the "Best Doctors in America" and "Best Doctors in New York" for 21 consecutive years (1994-2015). He has been also listed in the "America's Top Doctors for Cancer" directory for the last 8 years. Dr. Har-El recently published a two volume set "Head and Neck Surgery" which he co-edited. Dr. Har-El has been invited to lecture and teach in Europe, Asia, Middle East, Africa and Central and South America.



Jessica W. Lim, MD

Dr. Lim, Assistant Professor of Otolaryngology, treats patients of all ages and has a particular interest in endocrine surgery (thyroid, parathyroid), sinus disease, sleep disorders, voice and swallowing disorders and head and neck tumor surgery. She is proud to be recognized by her peers for her excellence in otolaryngology, as listed by Castle Connolly, Best Doctors and Super Doctors. She performed her preliminary general surgery training and completed otolaryngology residency at New York University Medical Center in 1997, followed by a head and neck/sinus surgery fellowship at Rush Presbyterian St.-Luke's Medical Center in Chicago. In 1998, Dr. Lim joined the academic faculty in the Department of Otolaryngology at SUNY-Downstate Medical Center in Brooklyn. In the

past, she has been Director of Otolaryngology Residency Training at SUNY-Downstate and has served as Director of Otolaryngology at Kings County Hospital Center and at Kingsbrook Jewish Medical Center. She is the author or co-author of numerous journal articles and book chapters, and she has presented original research at national and local meetings.

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.

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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. Dr. Sperling was involved in the creating the first cochlear implant program in the Borough of Brooklyn at SUNY affiliated hospitals, which continues today. Dr. Sperling's special clinical and research interests include otosclerosis, immune-mediated hearing loss, and tympanic membrane retraction.



Richard W. Westreich, MD

Dr. Westreich 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 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) and the current president of the New York Facial Plastic Surgery Society.

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 University Hospital of Brooklyn, Kings County Hospital Center, the Brooklyn Veterans Administration Medical Center, New York Methodist Hospital, and Maimonides Hospital; active participation in Grand Rounds and other weekly educational conferences at the University Hospital of Brooklyn; 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.



Rashid Chaudhry, MD

Dr. Chaudhry received his M.D. from University of Punjab, Nishtar Medical College Multan, Pakistan in 1969. He graduated in 1978 from the Otolaryngology-Head and Neck Surgery Residency Program at State University of New York Health Science Center of Brooklyn. Following graduation, he joined the faculty as instructor and then was promoted to Clinical Assistant Professor. Since 1980, he has been Chief and then Director of Otolaryngology at Brookdale University Hospital Medical Center, Brooklyn, New York. His clinical interests include Head and Neck Cancer, minimally invasive sinus surgery, Rhinometry and sleep disorders. He has been recognized by the colleagues "Best Doctors in New York" for the past 14 consecutive years (2000-2013) and has been listed "Best doctors" on multiple occasions in US News and World Report, New Yorker and Better Living Magazine. He is the author and co-author of various number of journal articles. He has made many presentations at the national and international scientific conferences



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Shawn C. Ciecko, MD, FACS

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. He has received several honors in his career including Duke Hospital's consultant of the year in 2006. 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 apnea. He has a special interest in Thyroid surgery. Dr. Ciecko is Director of ISMS – Team ENT that travels internationally on humanitarian missions performing Otolaryngology Head and Neck surgery as well as Plastic Surgery on a yearly basis.

Christopher de Souza, MD

Dr. de Souza has been Visiting Assistant Professor in the department since 1997. He is a consultant otolaryngologist and skull base surgeon at Tata Memorial Hospital in Bombay (Mumbai) India. 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 his, "Atlas of Otitis Media Clinicopathologic Correlations and Operative Techniques" with Michael Paparella, MD and Neil Sperling as co-authors. His previous books included texts in otolaryngology, pediatric otorhinolaryngology, head and neck surgery and an atlas of otitis media. He has done fellowships with Michael Glasscock and C Gary Jackson in 1994 in lateral skull base surgery. Dr. de Souza also completed a fellowship in endoscopic sinus surgery at the University of Pennsylvania with David Kennedy and Donald Lanza. He is the editor in chief of the 2 volume book, Head and Neck Surgery that was published by Jaypee Medical Publishers, India. 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".



Ramez Habib, MD FACS

Dr. Ramez Habib graduated from Columbia College, after which he attended Mount. Sinai School of Medicine. He completed his training at SUNY Downstate Medical Center and joined his father Dr. Mohsen Habib in private practice in Brooklyn.

He treats all aspects of ear, nose, and throat medicine for pediatric and adult patients of all ages. He has a particular interest in breathing and snoring disorders, including allergic and surgical management (utilizing state of the art minimally invasive balloon sinuplasty techniques). He also specializes in ear and balance disorders, with a specific focus on hearing restoration. Dr. Habib has been selected as a Top Doctor in Brooklyn by Castle Connolly."

Bhuvanesh Singh, MD

Dr. Singh is a graduate of the Medical School and Otolaryngology Residency Program at SUNY Health Science Center at Brooklyn. He is currently a professor and attending surgeon at Memorial Sloan-Kettering Cancer Center in Manhattan. Dr. Singh is the director of the Laboratory of Epithelial Cancer Biology and the Speech and Hearing Center. Dr. Singh, he is a board certified otolaryngologist specializing in Head and Neck Surgery. He received his PhD in medial molecular biology from the Netherlands Cancer Institute and is actively involved in basic science research. He has published over 190 articles in high impact journals including, the Journal of Biological Chemistry, Cell, EMBO, Proceedings of the National Academy of Sciences, and Cancer Research. He is also coeditor of two textbooks. Dr. Singh has received numerous grants and awards for his research work. He is also actively involved in clinical care.



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. He is a faculty member at the SUNY-Downstate School of Medicine and the Mt. Sinai School of Medicine. 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". Although he is a general Otolaryngologist seeing children and adults, Dr. Sinnreich's special interests are in the treatment of sleep and sinus disorders.

Additional Voluntary Faculty Who Contribute To The Department

Daniel Arick, MD
Jeffrey H Aroesty, MD
Howard Brownstein, MD
Tahl Colen, MD
Maurice Cohen, MD
John Dodaro, MD
Mark Erlich, MD
Stephen Finger, MD

Douglas Finn, MD
Sheldon Palgon, MD
Alden Pearl, MD
Manoj Kantu, MD
Sanjay Kantu, MD
Kanhaiyalal Kantu, MD
Steven Kushnick, MD
Anthony J. Sarro, MD

Prashant B. Shah, MD
K. Tarashansky, MD
Jeffrey M. Taffett, MD
Stanley Wien, MD
Melvin Wiederkehr, MD

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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 Sr. Advisor on Guidelines and Quality, 2011-
 Chair, AAO-HNS Advisory Council on Quality and Research, 2013-
 Chair, AAO-HNS Subspecialty Advisory Council, 2013-
 Editor, Cochrane Collaboration ENT Section, 2008-
 Society of University Otolaryngologists, 1994-
 Triological Society, 2003-
 American Otological Society, 2004-
 Guideline International Network (G-I-N), 2009-
 International Society for Otitis Media, 2013-

Frank E. Lucente, MD

Life Member, American Academy of Otolaryngology – Head and Neck Surgery
 Senior Fellow, American Laryngological, Rhinological and Otological Society (Triological)
 Life Member, American Laryngological Association
 Life Member, New York Academy of Medicine
 American Society of Geriatric Otolaryngology, 2007-
 Society of University Otolaryngologists - Public Relations Committee 1997-

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
 Member, American Society of Clinical Oncology
 Member, NY State Society of Otolaryngologists.

Boris Bentsianov, MD

American Medical Association, 1994-
 Downstate Alumni Association, 1997-
 Associate Member, American College of Physicians, 1999
 American Academy of Otolaryngology, 1999
 New York Laryngological society 2012-

Marina Boruk, MD

American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS), 2002-present
 American Academy of Otolaryngic Allergy (AAOA), 2007- present
 American Rhinologic Society (ARS), 2012 - present

Sydney Butts, MD

American Academy of Otolaryngology-Head and Neck Surgery, 2001-
 -Women in Otolaryngology Section
 American Cleft Palate-Craniofacial Association, 2003-
 -Membership Committee
 -ACPA Revitalization Task Force

American Academy of Facial Plastic and Reconstructive Surgery, 2001-
 -Face to Face Committee
 -Specialty Surgery Committee
 Women in Facial Plastic Surgery Committee, Committee Chair, 2011-13
 AO/Association for the Study of Internal Fixation, 2008-present
 -Craniofacial Faculty
 American College of Surgeons, October 2012
 -Fellow
 New York Facial Plastic Surgery Society, 2012

Natalya Chernichenko, MD

American Academy of Otolaryngology, 2005
 American Association for Cancer Research, 2011
 American Society of Clinical Oncology, 2011
 American Head and Neck Society, 2013
 New York Head and Neck Society, 2014 (Executive committee member)

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
 Humanitarian Organization - President - ISMS Team-ENT
<http://ismission.org/ent-team/>

Nira Goldstein, MD, MPH

American Academy of Otolaryngology - Head and Neck Surgery
 American Medical Association
 American Academy of Pediatrics
 Brooklyn Pediatric Society
 American Society of Pediatric Otolaryngology
 Triological Society, Fellow

Eli Gordin, MD

American Academy of Otolaryngology- Head and Neck Surgery
 American Academy of Facial Plastic and Reconstructive Surgery
 New York Head and Neck Society

Matthew Hanson, MD

American Academy of Otolaryngology – Head and Neck Surgery
 • Member, 1991
 • Elected Fellow, 1997
 Currently serves on AAO-HNS Implanted Hearing Devices Committee
 Previously served on AAO-HNS Vestibular, Hearing Aids and Development Committees
 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, New York Society of Otolaryngology
 Member, William House Cochlear Implant Study Group
 Member, Facial Nerve Disorders Study Group

Gady Har-El, MD

American Academy of Otolaryngology - Head and Neck Surgery, 1998, Fellow 1992
 American Academy of Facial Plastic and Reconstructive Surgery, 1989-
 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-



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American Rhinologic Society, Member, 1993-; Fellow, 1995
 American Laryngological Association, 1997-
 The American Broncho-Esophagological Association, Member, 1998-
 American Society for Head and Neck Surgery, 1996-
 American Laryngological, Rhinological and Otological Society (The Triological Society), Fellow, 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

AJessica W. Lim, MD
 American Academy of Otolaryngology – Head and Surgery
 New York Head and Neck Society
 American College of Surgeons - Fellow

Alice Lin, MD

American Head and Neck Society, 2013-
 American Academy of Otolaryngology- Head and Neck Surgery, 2007-

Richard Kollmar, MD

Society for Neuroscience
 Association for Research in Otolaryngology
 American Academy of Otolaryngology – Head and Neck Surgery

Michal Preis, MD

American Academy of Otolaryngology-Head and Neck Surgery

Mauro Ruffy, MD

Kings County Otolaryngology Society
 New York State Otolaryngology Society
 Fellow, American College of Surgeon
 American Medical Society
 Senior Member of the New York Otological Society

Abraham Shulman, M.D., F.A.C.S.

American Academy of Ophthalmology & Otolaryngology - Fellow 1962
 American College of Surgeons - Fellow 1974
 American Academy of Facial Plastic & Reconstructive Surgery - Fellow - 1963, Emeritus – 1997
 American Neurotology Society - Fellow 1974
 Association for Research in Otolaryngology -1964
 American Society for Laser Medicine and Surgery - Fellow Physician 1995;
 Life Associate Fellow 2009
 American Medical Association - Queens County Medical Society;
 New York Academy of Science Member- 1962-
 Society of Sigma XI – SUNY Downstate Medical Center Chapter

Joshua B. Silverman, MD, PhD

New York State Laryngological Society, post-graduate fellow, 2014 -
 American Laryngological Association (ALA), post-graduate fellow, 2013-
 American Medical Association (AMA), 1996-
 American Academy of Otolaryngology-Head & Neck Surgery (AAO-HNS), 2005-
 American College of Surgeons (ACS), 2006-

Abraham Sinnreich, MD

AAO-H&NS

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 Otologic Society, 1996-
 Alpha Omega Alpha Honor Society, 1985-
 Committee on Applicants, American College of Surgeons, Long Island District #1, 1999-

A. Paul Vastola, MD

New York Society of Otolaryngology - Head and Neck Society
 American Academy of Otolaryngology – Head and Neck Surgery
 Kings County Medical Society
 American College of Surgeons

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
 Fellow of the American College of Surgeons

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)

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VISITING LECTURER

Richard M. Rosenfeld, MD, MPH

Acute otitis media: evidence-based management. 2nd International Course on Pediatric Otorhinolaryngology, Hospital Ángeles, Puebla, Mexico, August 2014.

Otitis media with effusion: diagnosis and therapy. 2nd International Course on Pediatric Otorhinolaryngology, Hospital Ángeles, Puebla, Mexico, August 2014.

When to place ventilation tubes for otitis media. 2nd International Course on Pediatric Otorhinolaryngology, Hospital Ángeles, Puebla, Mexico, August 2014.

Rountable on tympanostomy tubes. 2nd International Course on Pediatric Otorhinolaryngology, Hospital Ángeles, Puebla, Mexico, August 2014.

Clinical practice guideline for acute pediatric sinusitis. 2nd International Course on Pediatric Otorhinolaryngology, Hospital Ángeles, Puebla, Mexico, August 2014.

Current guidelines for otitis and sinusitis. PM Pediatrics Grand Rounds, Lakeville, NY, September 2014.

Engaging consumers in clinical practice guidelines. Guideline International Network North American Community webinar, September 2014.

AAO-HNS tympanostomy tube guidelines: implications for clinicians. Otolaryngology Update and Alumni Day 2014, SUNY at Stony Brook, October 2014.

Evidence-based common sense. Medicine Grand Rounds, SUNY Downstate, October 2014.

Critical thinking in otolaryngology. Otorhinolaryngology Grand Rounds, Montefiore Medical Center, Bronx, NY, November 2014.

Current controversies in otitis media. Pediatric Grand Rounds, SUNY Downstate, December 2014.

Evidence-based common sense. 13th Asia-Oceania ORL-HNS Congress, Taipei, Taiwan, March 2015.

Diagnosis and medical management of rhinosinusitis in children. 13th Asia-Oceania ORL-HNS Congress, Taipei, Taiwan, March 2015.

How to publish in a peer-reviewed journal. 13th Asia-Oceania ORL-HNS Congress, Taipei, Taiwan, March 2015.

Indications for tympanostomy tubes in children. 65th National Congress of the Mexican Society of ORL Head & Neck Surgery, Veracruz, Mexico, May 2015.

Evidence-based tonsillectomy. 65th National Congress of the Mexican Society of ORL Head & Neck Surgery, Veracruz, Mexico, May 2015.

Avoiding complications in pediatric endoscopic sinus surgery. 65th National Congress of the Mexican Society of ORL Head & Neck Surgery, Veracruz, Mexico, May 2015.

Current management of otitis media with effusion. 65th National Congress of the Mexican Society of ORL Head & Neck Surgery, Veracruz, Mexico, May 2015.

Performance measures update. Guideline Task Force, AAO-HNS, Alexandria, VA, May 2015.

Evidence-based common sense. Charles J. Krause, MD, Lectureship, Department of Otolaryngology, University of Michigan, June 2015.

How to publish in peer-reviewed medical journals. Charles J. Krause, MD, Lectureship, Department of Otolaryngology, University of Michigan, June 2015.

Nira Goldstein, MD, MPH

Pediatric Sleep-Disordered Breathing: Evidence-based Approach to Evaluation and Management. Anne S, Rosenfeld RM, Ishman SL, Goldstein NA, Friedman NR. Miniseminar at the American Academy of Otolaryngology – Head and Neck Surgery Annual Meeting, Orlando, FL, September 2014.

Evaluation and Management of Pediatric Obstructive Sleep Apnea.

Invited lecture at the New York Methodist Hospital Department of Pediatrics Grand Rounds, Brooklyn, NY, October 2014.

Sydney Butts, MD

Perceptual Assessments of Velopharyngeal Dysfunction: Approaches for Clinical Training and Maximizing Patient Outcomes. Department of Otolaryngology Grand Rounds-Johns Hopkins University Hospital, March 2015.

Midface Buttresses, Naso-orbital-ethmoid fractures. 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 the lecture presentations-Baltimore MD, March 2015.

Maximizing Outcomes in Patients with Cleft Lip and Palate. Department of Otolaryngology Grand Rounds, Montefiore Medical Center, February 2015.

Improving Outcomes in Mandibular Fracture Management—What the Current Evidence Tells Us. Instruction Course at the American Academy of Facial Plastic and Reconstructive Surgery Annual Meeting, Orlando FL, September 2014.

Butts SC, Hetzler L, Kontis T and Patel K. Facial Plastic Surgery Emergencies: Recognition, Management and Prevention of Complications. Instruction Course at the American Academy of Facial Plastic and Reconstructive Surgery Annual Meeting, Orlando FL, September 2014.

Joshua Silverman, MD, PhD

February 26, 2015: SUNY Downstate Medical School, Brooklyn, NY, "Anatomic Basis of Disease: Larynx"

December 5, 2014: Multidisciplinary Head and Neck Symposium, New York Methodist Hospital, Brooklyn, NY, "Pediatric Head and Neck Masses".

October 2014: Lauren Holinger Educational Symposium, Lurie Children's Hospital of Chicago, Chicago, IL, "Laryngotracheal Reconstruction in Patients with Recurrent Stenosis".

August 2014: SUNY Downstate Physician Assistant Medical Education Lecture, SUNY Downstate, Brooklyn, NY, "Head and Neck Cancer".

Chris de Souza MS, DORL, DNB, FACS

Intratympanics in the treatment of vertigo. Panelist: Treatment of Tinnitus
34th NES (Neuro Equilibrimetric Society of India) Ahmedabad, India February 2015.

Abraham Shulman, MD

Shulman A. Modalities Tinnitus Treatment – Neuromodulation, Instrumentation, Pharmacology, Electric Stimulation, Surgery, and Neurofeedback, September 2014.

Krishnamurthi Sundaram, MD

Panel on robotic surgery of the head and neck, Annual Multidisciplinary Head and Neck Symposium, New York Methodist Hospital, Brooklyn, NY, December 2014.

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AWARDS, HONORS, & SPECIAL ACHIEVEMENTS

Richard M. Rosenfeld, MD, MPH

Charles J. Krause, MD, Lectureship, Dept. Otolaryngology, University of Michigan
 Guidelines International Network North America Outstanding Leadership Award
 President and Founder, International Society for Otitis Media
 Editor-in-Chief, Otolaryngology – Head and Neck Surgery Journal
 Senior Advisor for Guidelines and Quality, AAO-HNS
 Keynote Speaker, Otolaryngology Update and Alumni Day, SUNY at Stonybrook
 Keynote Speaker, 13th Asia-Oceania ORL-HNS Congress, Taipei, Taiwan
 Director, 18th International Symposium on Recent Advances in Otitis Media, National Harbor, Maryland
 Co-chair, Evidence-based Guidelines Affecting Policy, Practice, and Stakeholders Conference, NY Academy of Medicine
 Invited external thesis examiner, Department of Epidemiology and Biostatistics, McMaster University, Hamilton, Ontario
 America's Top Doctors, Castle-Connolly Medical Ltd
 Top Doctors in America, Consumer Research Council
 Best Doctors in America, Best Doctors Inc.
 Best Doctors in New York, New York Magazine
 Media Spokesperson for American Academy of Pediatrics
 Media Spokesperson for AAO-HNS
 Print and electronic media: Wall Street Journal, Medscape, NPR, Washington Post, WCBS Max Gomez

Sydney Butts, MD

AO North America-Chairperson-Principles of Operative Treatment of Craniomaxillofacial Trauma and Reconstruction. Boston Massachusetts, August 2014.
 Kings County Hospital Center-Annual Doctor's Day Award, May 2015

Natalya Chernichenko, MD

Appointed as a member of AAO-HNS Skull Base Surgery Committee

Nira Goldstein, MD, MPH

Professor of Clinical Otolaryngology 2014
 Program Chair, American Society of Pediatric Otolaryngology Annual Meeting
 Best Doctors in America 2015-2016
 Editorial Board, International Journal of Pediatric Otorhinolaryngology, 2014-present

Ramez Habib, MD

Top Doctor in Brooklyn by Castle Connolly

Joshua Silverman, MD, PhD

2015 SUNY Department of Otolaryngology Resident Teaching Award

Krishnamurthi Sundaram, MD

NY Superdoctor 2015.
 Best Doctors in America,
 Consumer Research Council, 2015.
 Marquis Who's who 2015

Hamid Arjomandi, MD

Third-place award at the 2015 Annual Metropolitan New York Resident Research Day Symposium for presentation on "A Rat Model of Postobstructive Pulmonary Edema".

George Ferzli, MD

Interview titled "Medicine: A Family Tradition" was published in the April 2015 Xavier Magazine published by Xavier High School, New York NY.

Sean Lewis, MD

John J. Conley Eastern Section Triologic Society Resident Research Award

American Academy of Otolaryngology- HNS Patient Safety and Quality Improvement Committee Member

American Academy of Otolaryngology- HNS American College of Surgery- Resident and Associate Society Delegate

AAO-HNS Resident Leadership Grant Fall, Academy Meeting

AAO-HNS Resident Leadership Grant BOG/Leadership forum



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DEPARTMENT EVENTS ANNUAL HOLIDAY PARTY



(L to R) Dr. Sundaram's wife Revathy, and staff: Jane and Carole

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Michal Preis, MD and Nira Goldstein, MD



Staff (L to R) Andrea, Billy's wife Katherine, Billy and Pat



Staff (L to R) Lana, her husband Michael and Valerie



Hamid Arjomandi, MD and his wife Atousa



– (L to R) Saleh Saleh and his wife Jennifer, John Weigand and his wife Sharon



Scott Harris, MD and his wife Stepha



Krishnamurthi Sundaram, MD and his wife Revathy



Richard Kollmar, PhD, his wife Rena and Eli Gordin, MD

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Jason Wasserman, MD and his wife Corey

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On the dance floor



On the dance floor



On the dance floor



On the dance floor



(L to R) Elizabeth Floyd, MD, Punam Thakkar, MD and Marisa Earley, MD



(L to R) Frank Lucente, MD, Richard Rosenfeld, MD and Gady Har-El, MD

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AMERICAN ACADEMY OF OTOLARYNGOLOGY – HEAD AND NECK SURGERY ACADEMIC BOWL



(L to R) Residents Sean Lewis, Colleen Plein and Punam Thakkar were awarded Second Place in the AAO-HNS Annual Academic Bowl and Resident competition

SUNY DOWNSTATE COCHLEAR IMPLANT TEAM



(R to L) Michal Preis, MD, Esther Hurley, MD, Matthew Hanson, MD, John Weigand, AuD, Stephanie Haburn, Audiology student, Laura Matlin, audiology student, and Veronica Barnwell, AuD

KCHC DOCTORS DAY



Front (L to R) Punam Thakkar, MD, Marisa Earley, MD, Jason Wasserman, MD, Back (L to R) Anthony Alessi, Matthew Hanson, MD, Lyuba Gitman, MD



(L to R) George Ferzli, MD, Lyuba Gitman, MD, Punam Thakkar, MD, Marisa Earley, MD and Lee Kaplowitz, MD



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MEDICAL MISSION

Ms Carrie Raz, one of Dr. John Weigand's trainee was recently on a mission trip to Toluca, Mexico for one week and saw an average of 500 people a day with about 25 volunteers. "I will never forget this humbling experience and am so grateful," says Carrie. The group picture is proof of that. The patient was so happy to hear again you can see it in her face.



L to R student audiologist Samantha Vrooman, Carrie Raz, the patient and Stephanie Loccisano, AuD

PUBLICATIONS

Capone RB, **Butts SC** and Jones LR. Starting a Cleft Team: A Primer for the Initiated and Motivated. *Facial Plastic Surgery Clinics of North America*. 2014 22(4):587-591

He S, He S, Chen CH, Deborde S, Bakst RL, **Chernichenko N**, McNamara WF, Lee SY, Barajas F, Yu Z, Al-Ahmadie HA, Wong RJ. The chemokine (CCL2-CCR2) signaling axis mediates perineural invasion. *Mol Cancer Res*. 2015 Feb;13(2):380-90. doi: 10.1158/1541-7786.MCR-14-0303. Epub 2014 Oct 13

de Souza C. Editor in Chief. *International Journal of Head and Neck Surgery*, Publishers: Jaypee Brothers, New Delhi, India. 2015

Goldstein NA, Hammerschlag MR. Peritonsillar, retropharyngeal, and parapharyngeal abscesses. In: Cherry JD, Harrison GJ, Kaplan SL, Steinbach WJ, Hotez P, eds. *Feigin & Cherry's Textbook of Pediatric Infectious Diseases*. 7th ed. Philadelphia, PA: Elsevier Saunders; 2014:167-175.

Goldstein NA. Child with recurrent sore throat and fever. *American Board of Otolaryngology Maintenance of Certification Self-Assessment Modules (SAM)*: Number 49; 2015.

Goldstein NA, Aronin C, Kantrowitz B, Hershcopf R, Fishkin S, Lee H,

Weaver DE, Yip C, Liaw C, Saadia TA, **Abramowitz J**, Weedon J.: The Prevalence of Sleep-Disordered Breathing in Children with Asthma and its Behavioral Effects. *Pediatr Pulmonol*. 2014 Dec 2. Doi: 10.1002/ppul.23120. [Epub ahead of print]

Brietzke SE, Shin JJ, Choi S, **Rosenfeld RM**. Clinical consensus statement: pediatric chronic rhinosinusitis. *Otolaryngol Head Neck Surg* 2014; 151:542-53.

Rosenfeld RM. Diagnosis [editorial]. *Otolaryngol Head Neck Surg* 2014; 15:1-3.

Tunkel DE, Bauer CA, Sun GH, **Rosenfeld RM**, et al. Clinical Practice Guideline: Tinnitus. *Otolaryngol Head Neck Surg*. 2014; 151:S1-40.

Rosenfeld RM. Topical antibiotics are superior to oral antibiotics in children with acute tympanostomy tube otorrhea (commentary). *J Pediatrics* 2014; 165:208.

Tunkel DE, Bauer C, Sun GH, **Rosenfeld RM**, et al. Clinical practice guideline: tinnitus. Executive summary. *Otolaryngol Head Neck Surg* 2014; 15:533-41.

Burton MB, Adams ME, **Rosenfeld RM**. Cochrane Corner: Interventions to improve hearing aid use in adult auditory rehabilitation. *Otolaryngol Head Neck Surg* 2014; 151:930-3.

Pederson H, Okland T, Boyers LN, Karimkhani C, **Rosenfeld RM**, et al. Global burden of otolaryngologic diseases in 2010 and systematic reviews and protocols in Cochrane Database of Systematic Reviews. *JAMA Arch Otolaryngol* 2015; 141:67-72.

Rosenfeld RM, Piccirillo JF, Chandrasekhar SS, et al. Clinical practice guideline (update): adult sinusitis. *Otolaryngol Head Neck Surg* 2015; 152: S1-S39.

Rosenfeld RM, Piccirillo JF, Chandrasekhar SS, et al. Clinical practice guideline (update): adult sinusitis executive summary. *Otolaryngol Head Neck Surg* 2015; 152: 598-609.

Mor N, Finkel DA, **Hanson MB**, **Rosenfeld RM**. Evaluating outcomes in patients treated for middle ear cholesteatoma by mastoidectomy: a systematic review of measures used. *Otolaryngol Head Neck Surg*; 2014; 151:923-929.

Goldstein NA. Book Review. *Int J Pediatr Otorhinolaryngol*, 2015, <http://dx.doi.org/10.1016/j.ijporl.2015.05.025>.

Sukato DC, Tohme S, Chalhoub D, Han K, Amesur N, Zajko A, Orons P, Marsh JW, Geller DA, Tsung A. The prognostic role of neutrophil-to-lymphocyte ratio in patients with unresectable hepatocellular carcinoma treated with radioembolization. *Journal of Vascular and Interventional Radiology*. PMID: 25824315. 2015 26(6): 816-824.

Leung AM, Chair, Avram AM, Brenner AV, Duntas LH, Ehrenkranz J, Hennessey JV, Lee SL, Pearce EN, Roman S, Stagnaro-Green A, Sturgis E, **Sundaram K**, Thomas M, Wexler JA. Potential risks of excess iodine ingestion and exposure. Letter to the editor. *American Thyroid Association Public Health Committee. Thyroid*. PMID: 25275241. 2015; 25(2): 145-146.

de Souza C. (editor) *Textbook on Disorders of the Thyroid and parathyroid glands*, Plural Publishers, San Diego, USA (In Press).

de Souza C. (editor) *Textbook on Implantable Hearing devices*, Plural Publishers, San Diego, USA (In Press).

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Rosenfeld RM. Patients [editorial]; Otolaryngol Head Neck Surg; In press.

Bhattacharyya N, Harvey RJ, **Rosenfeld RM.** Cochrane Corner: Interventions for chronic rhinosinusitis with polyps. Otolaryngol Head Neck Surg; In press.

Rosenfeld RM, Nnacheta LC, Corrigan MD. Clinical consensus statement development manual. Otolaryngol Head Neck Surg; In press.

Sperling NM, Lucente FE, Disease of External Ear, in International Textbook of Otolaryngologic Principles and Practice, Paparella M, Singh B, DaCosta S (ed), Jaypee Brothers Medical Publishers, In press.

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PRESENTATIONS

Richard Rosenfeld, MD, MPH

Taming the statistical shrew. Cochrane Conclave, UK Cochrane Center, Oxford, UK, July 2014.

Antibiotics in otolaryngology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2014.

Quality in otolaryngology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2014.

How to read journal articles. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2014.

AAO-HNSF Clinical practice guideline: tinnitus. Miniseminar, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Understanding clinical practice guidelines. Instructional course, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Rapid peer review. In: View from the editors – peer review, publishing, and the editorial process. Miniseminar, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Clinical consensus statement methodology. In: Getting published – tips for residents, young physicians, and practicing clinicians. Miniseminar, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Evidence-based otitis media 2014. Instruction course, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

How to review a journal manuscript. Instruction course, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Pediatric sleep-disordered breathing: evidence-based approach to evaluation and management. Miniseminar, AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

Editor in chief report to the editorial board. AAO-HNSF Annual Meeting, Orlando, FL, September 2014.

ACGME core competencies: medical knowledge and practice based learning and improvement. Otolaryngology Grand Rounds, SUNY Downstate, October 2014.

Reflections on a professional society's experience in accounting for multiple chronic conditions in its guidelines. American Thoracic Society Annual Meeting, Orlando, FL, October 2014.

AAO-HNS tympanostomy tube guidelines: implications for clinicians. Otolaryngology Update and Alumni Day 2014, SUNY at StonyBrook, Stonybrook, NY, October 2014.

ACGME core competencies: professionalism. Otolaryngology Grand Rounds SUNY Downstate, November 2014.

Integrating guidelines into resident education: innovations in curriculum development. SUO, AADO, OPDO Combined Meeting, Chicago, IL, November 2014.

How to get abstracts and presentations accepted at scientific meetings. Otolaryngology Grand Rounds, SUNY Downstate, December 2014.

Preview of the AAO-HNS adult sinusitis guideline update. AAO-HNS Guideline Task Force, AAO-HNS Headquarters, Alexandria, VA, December 2014.

Using templates for research planning. Otolaryngology Grand Rounds, SUNY Downstate, January 2015.

Effective time management. Otolaryngology Grand Rounds, SUNY Downstate, January 2015.

Overview of otitis media with effusion. AAO-HNS Otitis Media with Effusion Guideline Development Group, AAO-HNS, Alexandria, VA, February 2015.

Quality improvement as the driving force for guidelines scope and content. Evidence-based Guidelines Affecting Policy, Practice, and Stakeholders (E-GAPPS II) conference, NY Academy Medicine, New York, NY, March 2015.

Early stakeholder engagement and implementation planning within a specialty society context (co-presenters: Stephanie Jones, Barbara Warren). Evidence-based Guidelines Affecting Policy, Practice, and Stakeholders (E-GAPPS II) conference, NY Academy Medicine, New York, NY, March 2015.

AAO-HNS performance measures task force. AAO-HNS Board of Directors Meeting, Crystal City, VA, March 2015.

A quality primer for otolaryngologists. AAO-HNS Foundation Leadership Forum, Crystal City, VA, March 2015.

Performance measures update. Guideline Task Force, AAO-HNS, Alexandria, VA, May 2015.

Appropriate use criteria. Guideline Task Force, AAO-HNS, Alexandria, VA, May 2015.

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Preview of the otitis media with effusion clinical practice guideline. Guideline Task Force, AAO-HNS, Alexandria, May 2015.

Introduction to quality in otolaryngology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, May 2015.

Office insertion of tympanostomy tubes in young children. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, May 2015.

Avoiding complications in pediatric ethmoidectomy and antrostomy. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, May 2015.

Current guidelines for otitis media. Moderator and presenter. 18th International Symposium on Recent Advances in Otitis Media, National Harbor, MD, June 2015.

Understanding otitis media guidelines: an interactive workshop for users, clinicians, and developers. 18th International Symposium on Recent Advances in Otitis Media, National Harbor, MD, June 2015.

Office insertion of tympanostomy tubes without anesthesia in young children: safety, technique, and experience management. 18th International Symposium on Recent Advances in Otitis Media, National Harbor, MD, June 2015.

New guidelines for managing otitis media with effusion in newborn hearing screening failures. 18th International Symposium on Recent Advances in Otitis Media, National Harbor, MD, June 2015.

Clinical practice guideline methodology. Cerumen Guideline Update Meeting, AAO-HNS, Alexandria, VA, June 2015.

Sydney Butts, MD

Local grafts and flaps. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, July 2014.

Summer school exam and review. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, August 2014.

Application of virtual surgical planning. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, February 2105.

Perioperativepain management of mandibular fractures: A Systematic Review of the Literature. Podium presentation at the American Academy of Facial Plastic and Reconstructive Surgery Spring Scientific Meeting in conjunction with the Combined Otolaryngology Spring Meeting, Boston MA, April 2015.

Perceptual assessments of velopharyngeal dysfunction by otolaryngology residents. Annual FEL Alumni and Resident Research Day. Brooklyn NY, June 2015.

Boris Bentsianov, MD

Larynx/Dysphonia/Dysphagia. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, July 2014.

Natalya Chernichenko, MD

Parathyroid glands, hyperthyroidism, and parathyroid surgery. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, May 2105.

Perineural Invasion in Head and Neck Cancer. The Fifth Annual Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery. New York Methodist Hospital, Brooklyn NY, December 2014.

Punam Thakkar, Lyuba Gitman, Niv Mor, Alice Lin, Natalya Chernichenko. Epitheloid Hemangioma Of The Mandible: A Case Report And Review Of The Literature, International Federation of Head and Neck Oncologic Societies, 5th World Congress. NY, NY, July 2014

Krishnamurthi Sundaram, Rudolph Parris, Marisa Earley, Jason Abramowitz, Joshua Aizen, Natalya Chernichenko. Marital Status And Survival In Head & Neck Cancers, International Federation of Head and Neck Oncologic Societies, 5th World Congress. NY, NY, July 2014

Sylvie Deborde, Tatiana Omelchenko, Shizhi He, Natalya Chernichenko, Sei Yong Lee, Fernando Barajas, Chun-Hao Chen, William McNamara, Richard Bakst, Alan Hall, Richard Wong. Schwann Cells Recruit And Potentiate Cancer Cells In The Process Of Perineural Invasion, International Federation of Head and Neck Oncologic Societies, 5th World Congress. NY, NY, July 2014

Nira Goldstein, MD

Research review and methodology: Review of the Review Grid. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, July 2014.

ACGME-related discussion: Duty Hours/Department Escalation Policy. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, July 2014.

Core competency and residency issues. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, August 2014.

Etiology & therapeutic strategies: pediatric illness. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, August 2014.

Research review and methodology: resident research opportunities in otolaryngology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, August 2014.

ACGME-related discussion: fatigue management. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, August 2014.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, September 2014.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, October 2014.

ACGME related discussion: Quality Assurance (QI). Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, October 2014.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, November 2014.

ACGME related discussion: quality assurance (QI). Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, November 2014.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, January 2015.

Research review and methodology: Study Files/Data Entry. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, February 2015.

ACGME related discussion: substance abuse/disruptive behavior. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, February 2015.

ACGME core competency and residency issues: patient care, work hours. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, March 2015.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, March 2015.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, April 2015.

Research review and methodology: overview of epidemiologic study designs. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, May 2015.

Research review and methodology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, June 2015.

ACGME related discussion: systems based practice. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn NY, June 2015.

Marina Boruk, MD

Mock oral boards. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, July 2014.

Review of sinus CT's. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, September 2014.

Update to endoscopic approaches to the anterior skull base. The Fifth Annual Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery. New York Methodist Hospital, Brooklyn NY, December 2014.

CT sinus review. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, January 2015.

Endoscopic sinus surgery technique course. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, January 2015.

Mock oral boards. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, January 2015.

Eli Gordin, MD

Reconstructive Pearls in the Head and Neck. The Fifth Annual Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery. New York Methodist Hospital, Brooklyn NY, December 2014.

Rhinoplasty. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, February 2015.

Reconstructive surgery of the head and neck in patients with high cumulative doses of pre-operative radiation. The Annual FEL Alumni and Resident Research Day. Brooklyn NY, June 2015.

Matthew Hanson, MD

Basic science review: hearing and balance physiology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, July 2014.

Deafness in America. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, October 2014.

Gady Har-El, MD

Skull base surgery in the US: 1965 to 2015, and in Brooklyn: 1985 to 2005. The Annual FEL Alumni and Resident Research Day. Brooklyn NY, June 2015.

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Richard Kollmar, PhD

Stewart M, Nakase K, Sundaram K, Silverman J, Kollmar R. Obstructive Apnea Due to Laryngospasms During Seizures, But Not Central Apnea Causes Hypoxic Cardiac Derangements in Rats. American Epilepsy Society Annual Meeting, Philadelphia, PA. December 2014.

Das O, Kadosh D, Balogun A, Heng L, Kollmar R. Otolin-1 and the Ultrastructure of Vertebrate Ear Stones. American Society for Biochemistry and Molecular Biology Annual Meeting, Boston, MA. March 2015.

Harris S, Thakkar P, Balasubramanian S, Shuminov R, Stewart M, Nakase K, Silverman J, Sundaram K, Kollmar S. Development of a Rat Model for Persistent Vocal Fold Paralysis due to Recurrent Laryngeal Nerve Crush. American Head and Neck Society Annual Meeting & Translational Research Meeting/ Combined Otolaryngology Spring Meetings. Boston, MA. April 2015.

Jessica Lim, MD

Embryology of the head and neck. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, July 2014.

Embryology of the head and neck. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

Alice Lin, MD

Free flaps physiology & care. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

Cancer and the HPV Virus. The Fifth Annual Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery. New York Methodist Hospital, Brooklyn NY, December 2014.

Michal Pries, MD

Tinnitus. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

Joshua Silverman, MD, PhD

Airway physiology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

John J. Conley, MD Resident Research Award for Systematic Review for Surgical Treatment of Adult Laryngotracheal Stenosis presented by Sean Lewis, MD. Triological Society Combined Sections Meeting, San Diego, CA, January 2015

Development of a rat model for persistent vocal fold paralysis due to recurrent laryngeal nerve crush, presented by Scott Harris, MD. American Head and Neck Society Translation Research Meeting, Boston, MA, April 2015.

Krishnamurthi Sundaram, MD

Thyroid/parathyroid. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

Pediatric Head and Neck Masses. The Fifth Annual Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery. New York Methodist Hospital, Brooklyn NY, December 2014.

Michael Weiss, MD

Issues in management of laryngeal cancer. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, June 2015.

Richard Westreich, MD

Nasal/sinus physiology. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, July 2014.

Jason Abramowitz, MD

Complications of tracheotomy. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, July 2014.

Botox and injectables. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, February 2015.

Adverse event reporting for proton pump inhibitor therapy. The Annual FEL Alumni and Resident Research Day. Brooklyn NY, June 2015.

Hamid Arjomandi, MD

Sublingual immunotherapy in allergic rhinitis - current status in United States. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, Jan 2015.

Resident engagement in AAO-SR. SUNY Downstate Department of Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, Apr 2015.

ACGME Related Discussion: PDSA - Prevention of hypocalcemia in post-thyroidectomy patients. SUNY Downstate Department of Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, May 2015.

A rat model of post-obstructive pulmonary edema. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

A rat model of post-obstructive pulmonary edema. The Annual Metropolitan New York Resident Research Day Symposium. June 2015.

Elizabeth Floyd, MD

Cost of tonsillectomy. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, November 2014.

Core clinical: Facial Trauma Review. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, March 2015.

Peri-operative pain management of mandibular fractures: A systematic review of the literature. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Peri-operative pain management of mandibular fractures: a systematic review of literature. The Annual Metropolitan New York Resident Research Day Symposium. June 2015.

Lyuba Gitman, MD

Risk factors for orofacial clefting. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, December 2014.

Core clinical: Facial trauma review. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, March 2015.

Epidemiological Factors Associated with the Prevalence of Orofacial Clefting in New York City. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Scott Harris, MD

Frequency and indications for rotational flap use after completion of a head and neck reconstructive fellowship. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Lee Kaplowitz, MD

Evidence based approach to optimizing perioperative free flap outcomes. Grand Rounds, SUNY Downstate, Brooklyn, NY, March 2015.

Case report: Nasal mass in a neonate diagnosed in-utero. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Nikita Kohli, MD

Temporal bone trauma. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, October 2014.

An unusual case of foreign body aspiration: dislodged tracheostomy tube. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Sean Lewis, MD

Ballistic injuries in the maxillofacial skeleton. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, August 2014.

Establishing a treatment paradigm for early glottic cancer. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, March 2015.

Systematic review of surgical management for pediatric tracheocutaneous fistula closure. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Colleen Plein, MD

Core Clinical: Neurolaryngology basics. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, April 2015.

Systematic Review of Eligibility and Outcomes in Tinnitus Trials. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Punam Thakkar, MD

Approaches to the maxillofacial skeleton. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, October 2014.

Salvage surgery for recurrent squamous cell carcinoma of the oropharynx. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, June 2015.

Development of a Rat Model for Persistent Vocal Fold Paralysis due to Recurrent Laryngeal Nerve Crush. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

Jason Wasserman, MD

Malignant melanoma: Staging and treatment. Otolaryngology Grand Rounds, SUNY Downstate, Brooklyn, NY, May 2015.

The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis: A Systematic Review. The Annual FEL Alumni and Resident Research Day. SUNY Downstate, Brooklyn, NY, June 2015.

AFFILIATED HOSPITALS

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 Otolaryngology, 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, 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.

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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.

New York Methodist Hospital

New York Methodist Hospital (NYM) is located in the historic brownstone neighborhood of Park Slope in Brooklyn, New York, between Seventh and Eighth Avenues, on Sixth Street. The hospital is a 651-bed voluntary, non-profit hospital with about 38,000 annual inpatients admissions, 250,000 annual outpatient visits, and about 6,000 births. The Hospital is also a major teaching hospital, with ten graduate medical education programs and five schools that provide training in allied health professions. New York Methodist Hospital is affiliated with the Weill Cornell Medical College of Cornell University and is a member of the New York-Presbyterian Healthcare System.

New York Methodist has a number of institutes that bring together multidisciplinary specialists to provide care and offer community education and physician referral services. The Institute for Advanced Otolaryngology at NYM was established by the SUNY Downstate Department of Otolaryngology in July 2013 and includes the Center for Head, Neck and Skull Base Surgery and the Center for Advanced Pediatric Otolaryngology. Our on-site presence includes two otolaryngology residents (PGY5 and PGY2 with home call), administrative support, a faculty practice, and a new medical student rotation (July 2014). Daily clinical and operative instruction is provided by our faculty along with a monthly tumor board. Tertiary level cases are performed with state-of-the-art equipment that includes lasers, robots, image guidance, and operative microscopes and also with equipment for microvascular, advanced pediatric, cleft lip and palate, rhinologic, laryngeal, otologic, and head, neck, and skull base surgery.

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EDUCATIONAL PROGRAMS

Executive Summary

The Department of Otolaryngology at SUNY Downstate Medical Center had intensive continuing medical education activities during the academic year of 2014-2015. 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 SUNY Downstate campus. 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 15 and 30 attendees per session, with total attendance of 1100.

The morning conference is divided into four parts. The first half hour from 6:30 to 7:00am is dedicated to the discussion of various residency related topics. During the 7:00 to 8:00 am hour, lectures are delivered by invited guests who are nationally known for their expertise and experience in a variety of topics. In-house speakers and faculty as well as residents present information during the 8:00 to 9:00 am hour. Also, journal club occurs from 8:00 to 9:00 on the second Thursday of each month and morbidity & mortality conference occurs during this time on the fourth Thursday. Biweekly Head and Neck Tumor Board are included in the schedule from 9:00 to 10:00. Alternating with the Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) course. Different aspects of basic sciences as related to the field of Otolaryngology-Head & Neck Surgery are presented and discussed from 7:00 to 9:00 am during July and August.

The roster of guest speakers for 2014-2015 is included in this report. In general, all the speakers were knowledgeable and 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.

GOALS AND OBJECTIVES

July 1, 2015 – June 30, 2016

Department of Otolaryngology SUNY-Downstate and Affiliated Hospitals Educational Program for Residents

Affiliated Institutions: Kings County Hospital Center, New York Methodist Hospital, Maimonides Medical Center, Brooklyn VA Medical Center, University Hospital of Brooklyn, Manhattan Eye, Ear and Throat Hospital, Richmond University Medical Center

Chair and Program Director: Richard M. Rosenfeld, MD, MPH

Associate Program Director: Nira A. Goldstein, MD, MPH

Overall Residency Experience

Goals and Objectives for resident education are best understood in the context of the entire program, which is based in 7 academic centers, as well as in private offices in the region. The academic centers are located in Brooklyn, Manhattan and Staten Island and include Kings County Hospital Center (KCHC), University Hospital of Brooklyn (UHB), New York Methodist Hospital (Methodist), Maimonides Medical Center (Maimo), the Brooklyn Veterans Administration Medical Center (BVAMC), the Manhattan Eye, Ear and Throat Hospital (MEETH), and Richmond University Medical Center (RICHU).

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 exciting, 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, microvascular reconstruction, 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 clinical care and the 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 MedThe 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 in the Department of Otolaryngology.

There are 15 residents, with 3 residents accepted each year through the National Resident Matching Program. The training program is designed to provide graduated responsibility, culminating in an

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intensive and tailored Chief Residency year. There is full attending physician supervision in clinics, inpatient care and operating rooms in all affiliated hospitals.

Rotation Schedule

Beginning 7/1/12, a 3-year transition period started to progressively move the research rotation from the PGY-4 year to the PGY-3 year. Over each year, the PGY-4 resident is doing one less month of the research rotation per year and one additional month of clinical work and the PGY-3 is doing one less month of clinical work and one additional month of research. The PGY years affected (current PGY-3s, and PGY-4s) will do 3 months of research with one additional month of ambulatory care. Beginning 7/1/15, the entire 4 month research rotation will be in the PGY-3 year and the PGY-4 residents will do 4 months of ambulatory care.

Block Schedule for PGY1 Year

PGY-1	Surgery (5 months, in at least 3 of the following: general, vascular, oncology, thoracic, pediatrics and plastics)	1 month in each of the following:	Otolaryngology at KCHC/UHB (2 months)
PGY-2	KCHC/UHB	Anesthesia (UHB), Critical Care (KCHC), Emergency Medicine (KCHC), and Neurosurgery (KCHC)	Methodist
PGY-3	Research	KCHC/UHB	KCHC/UHB
PGY-4	Ambulatory Care/MEETH	BVAMC	KCHC/UHB
PGY-5	Methodist	Maimonides	KCHC/UHB

ACGME Core Residency Training Competencies by Training Year (SUNY Downstate Department of Otolaryngology)

Purpose

This document describes expectations by training year for otolaryngology residents enrolled in the training program at the SUNY Downstate Department of Otolaryngology and apply to the primary training hospital and all affiliates. This is intended as a supplement to the document entitled "Residency Program Goals and Objectives," which is a more comprehensive overview of the program structure. To view the Department of Otolaryngology's "Residency Program Goals and Objectives" please go to <http://www.downstate.edu/otolaryngology/>.

Table 1

Medical Knowledge: Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social behavioral sciences, as well as the application of this knowledge to patient care.

	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Annual otolaryngology in-service examination	Participate in examination	Meet or exceed median PGY-2 score	Meet or exceed median PGY-3 score	Meet or exceed median PGY-4 score	Meet or exceed median PGY-5 score
Basic science*	Familiarity	Attend Basic Science Course	Attend Basic Science Course	In-depth knowledge	In-depth knowledge
H&N Anatomy	Familiarity	Thorough understanding	In-depth knowledge	Mastery	Mastery
Clinical medicine learning focus	Approach to the patient	Surgical indications and general otolaryngology	General otolaryngology and subspecialties	Otolaryngology subspecialties	Mastery
Temporal bone course†	—	Mastoidectomy, labyrinthectomy	Cochleostomy, ossiculoplasty	Develop confidence; avoid complications	Teach junior residents
COCLIA‡	—	Present basic topics	Present more advanced topics	Present advanced and complex topics	Supervise junior residents; present
AO North America Maxillofacial Trauma Course	—	—	Attend as PGY-3 or PGY-4 resident	Attend as PGY-3 or PGY-4 resident	—
Cornell-Weill otolaryngic allergy course	—	—	Participate in on-line session	Participate in on-line sessions	—
Textbook reading (Bailey's and/or Cummings)	Case-based; skim chapters	Read all chapters for exposure to field	Read all chapters for understanding	Re-read all chapters for greater insight	Re-read all chapters for mastery
Journal reading	Skim core journals	Read core** ≥ 60 minutes/week	Read core** and selected others	Read core** & sub-specialty journals	Read core** & sub-specialty journals
Home Study Course	Exposure	100% participation	100% participation	100% participation	100% participation

*Basic Science includes anatomy, physiology, genetics, audiology, speech pathology, taste/smell, wound healing, child development

†Temporal Bone Course includes anatomy, mastoid drilling technique, middle ear prosthesis placement, and implantable hearing devices

‡COCLIA, or Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach, is a teaching tool from the AAO-HNS Foundation to help residents learn otolaryngology – head and neck surgery through bimonthly conferences with faculty supervision

**Core journals are *Ann Otol Rhinol Laryngol*, *Arch Otolaryngol*, *Head Neck Surg*, *Laryngoscope*, *Otolaryngol Head Neck Surg*, and *Otolaryngol Clin NA*.

Table 2

Patient Care, Clinical Skills: Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Clinical skills and basic procedures	Perform H&N exam	Proficiency in H&N exam; perform flexible endoscopy	Proficiency in adult endoscopy; develop laser skills	Proficiency in peds endoscopy; learn stroboscopy	Mastery; develops personal style and approach
Admissions, transfers, discharges	Participates	Coordinates with senior residents	Coordinates with senior residents	Supervision and teaching	Supervision and teaching
Use of labs, ancillary studies, consultations	Understands appropriate use	Handles with supervision	Effective and appropriate use	Masters appropriate use	Mastery and team leader
Administrative skills: EHR, documentation, medical records, transcriptions	Uses appropriately	Timely and accurate completion of assignments	Timely and accurate completion of assignments	Increasing role in supervision and teaching	Mastery and team leader
Follow-up care	Participates	Completes assignments	Plans care and ensures follow-up	Increasing role in coordination of care	Master and team leader
Universal precautions	Uses appropriately	Uses appropriately	Uses and teaches	Uses and teaches	Leader & role model
General otolaryngology/ head and neck surgery	<ul style="list-style-type: none"> Physical examination ACLS/ ATLS Central line placement Arterial blood gas sampling Nasogastric tube placement Foley catheter placement Incision and drainage, simple abscesses Management tracheostomy tubes Basic wound management 	<ul style="list-style-type: none"> Fine needle aspiration, neck Insertion of tracheostomy tube Direct laryngoscopy, diagnostic I&D neck abscess 	<ul style="list-style-type: none"> Level 1 neck dissection Tracheotomy Deep lymph node excision/ biopsy Submandibular gland excision Caldwell Luc procedure Esophagoscopy, diagnostic, dilation Panendoscopy with biopsy 	<ul style="list-style-type: none"> Superficial parotidectomy Selective neck dissection Partial glossectomy Thyroidectomy Parathyroidectomy Excision congenital neck mass, all types including thyroglossal duct and branchial cleft cysts Endoscopic approach hypopharynx Lip wedge resection Oral cavity tumor resection Auricular excision 	<ul style="list-style-type: none"> Total parotidectomy ± facial nerve graft Total glossectomy Radical neck dissection Modified radical neck dissection Lateral rhinotomy Skull base resection, anterior, middle Composite resection, oral cavity/ oropharynx Mandibular resection Parapharyngeal space tumor excision Maxillectomy ± orbital exenteration Laryngopharyngectomy Major vessel repair
Otology and neurotology	N/A	<ul style="list-style-type: none"> Microscopic examination, external ear In-office adult myringotomy/ tube Audiogram interpretation Tympanogram interpretation 	<ul style="list-style-type: none"> Tympanoplasty, I Simple mastoidectomy 	<ul style="list-style-type: none"> Tympanoplasty II-IV Mastoidectomy, canal wall down Canaloplasty Resection cerebellopontine angle tumor, assistant 	<ul style="list-style-type: none"> Ossiculoplasty Stapedectomy Temporal bone resection Skull base resection, lateral Aural atresia repair Facial nerve decompression Repair perilymphatic fistula Labyrinthectomy Cochlear implantation Resection CPA tumor, assistant

Allergy	N/A	<ul style="list-style-type: none"> Fiberoptic intubation, angioedema 	<ul style="list-style-type: none"> Administer and interpret allergy skin test Allergy emergency protocol 	<ul style="list-style-type: none"> Lingual tonsillectomy 	<ul style="list-style-type: none"> Tongue advancement procedure
Adult sleep medicine and surgery	N/A	<ul style="list-style-type: none"> Septoplasty, turbinate reduction Tonsillectomy 	<ul style="list-style-type: none"> Uvulopalatopharyngoplasty 	<ul style="list-style-type: none"> Endoscopic laser ablation ± dilation Laryngotracheal stenosis Laryngoscopy with microflap excision, vocal fold mass Endoscopic/ open excision Zenker's diverticulum Tracheoesophageal fistula creation Arytenoidectomy 	<ul style="list-style-type: none"> Total laryngectomy Partial laryngectomy, open or endoscopic Laryngotracheoplasty Repair laryngeal fracture Tracheal resection, anastomosis Thyroplasty, arytenoid adduction Injection laryngoplasty
Laryngology	<ul style="list-style-type: none"> Flexible laryngoscopy 	<ul style="list-style-type: none"> Bronchoscopy, diagnostic Laryngoscopy with excision 	<ul style="list-style-type: none"> Endoscopic anterior ethmoidectomy Endoscopic maxillary antrostomy Endoscopic polypectomy Endoscopic nasopharyngeal biopsy 	<ul style="list-style-type: none"> Endoscopic posterior ethmoidectomy Endoscopic sphenoidectomy Endoscopic frontal sinusotomy Frontal sinus trephination 	<ul style="list-style-type: none"> Endoscopic repair CSF leak Endoscopic sphenopalatine ligation Osteoplastic frontal sinus obliteration Advanced endoscopic frontal sinusotomy Dacryocystorhinostomy
Sinonasal	<ul style="list-style-type: none"> Flexible nasopharyngoscopy 	<ul style="list-style-type: none"> Anterior and posterior nasal packing Septoplasty Submucous turbinate resection 	<ul style="list-style-type: none"> Excision congenital neck masses, all types Bronchoscopy, diagnostic, foreign body removal Esophagoscopy with foreign body removal 	<ul style="list-style-type: none"> Endoscopic management, laryngotracheal stenosis Choanal atresia repair Otoplasty Tracheostomy, age under 2 years 	<ul style="list-style-type: none"> Laryngotracheal reconstruction, open Lymphangioma excision Management subglottic hemangioma Excision juvenile nasopharyngeal angiofibroma
Pediatric otolaryngology	N/A	<ul style="list-style-type: none"> Foreign body removal, ear, nose, pharynx Myringotomy and tube placement Tonsillectomy Adenoidectomy Frenuloplasty 	<ul style="list-style-type: none"> Reduction facial fractures, nasal, malar, orbital blowout, mandible, frontal Pedicle flap procedure, local Split and full thickness skin grafts Repair complex facial lacerations Scar revision 	<ul style="list-style-type: none"> Rhinoplasty, closed Pedicle flap procedure, regional Reconstruction external ear Tissue expander placement, removal Eyelid weight placement Brow lift Rhytidectomy 	<ul style="list-style-type: none"> Pedicle flap procedure, myocutaneous Rhinoplasty, open Microsurgical free flap Blepharoplasty Facial nerve graft or repair Facial reanimation procedures Cleft palate, Cleft lip repair
Plastic and reconstructive surgery	<ul style="list-style-type: none"> Suturing of uncomplicated lacerations 	<ul style="list-style-type: none"> Closed reduction, mandible fracture Closed reduction, nasal fracture Excision skin lesions, primary closure 			

Table 3

Practice-based Learning and Improvement (PBL): Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Identify strengths, deficiencies, and limits in one's knowledge and expertise; set learning and improvement goals; perform appropriate learning activities	Yes	Yes	Yes	Yes	Yes
Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement	Participate	Participate	Present at multi-disciplinary tumor board	Organize tumor board & present at M&M	Organize tumor board & present at M&M
Incorporate formative evaluation feedback into daily practice; use information technology to optimize learning	Yes	Yes	Yes	Yes	Yes
Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems	Learn search strategies	Use information resources effectively	Learn critical appraisal techniques	Assimilate and apply evidence to patient care	Assimilate and apply evidence to patient care
Participate in the departmental Grand Rounds program	Attend and learn format	Case report and topic review	Evidence-based presentations	Evidence-based presentations	Invite speakers* and organize program
Participate in monthly journal club	Learn critical appraisal	Learn critical appraisal	Master critical appraisal	Master critical appraisal	Organize and teach
Participate in the education of patients, families, students residents, and other health professionals	Participate in team	Participate in team	Develop independence	Serve as role model	Serve as role model
Research expectations	Co-investigator	Case report	Chart review	Planned, protocol-driven research	Present and publish research

*Invitations to invited speakers should be issued at least 6 months in advance, with a "cc" to the relevant attending

Table 4

Interpersonal and Communication Skills: Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds	Participate with supervision	Participate with supervision	Greater independence	Continued improvement	Team leader and mentor to junior residents
Communicate effectively with physicians, other health professionals, and health related agencies	Participate with supervision	Participate with supervision	Greater independence	Continued improvement	Team leader and mentor to junior residents
Work effectively as a member or leader of a health care team or other professional group	Work effectively as team member	Work effectively as team member	Improve leadership	Prepare for role as chief resident	Team leader
Act in a consultative role to other physicians and health professionals	Gather information and present	Gather information and present	Formulate plan with supervision	Increased independence	Mastery
Maintain comprehensive, timely, and legible medical records	Gather information and present Yes	Gather information and present Yes	Formulate plan with supervision Yes	Increased independence Yes	Mastery Yes

Table 5

Professionalism: Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Demonstrate compassion, integrity, and respect for others	Yes	Yes	Yes	Yes	Yes
Demonstrate responsiveness to patient needs that supersedes self-interest	Awareness	Awareness	Progressive implementation	Progressive implementation	Mastery
Demonstrate respect for patient privacy and autonomy	Yes	Yes	Yes	Yes	Yes
Demonstrate accountability to patients, society, and the profession	Accountability to patients; self-mastery	Accountability to patients; self-mastery	Serve as role model for team, department	Role model at regional and national meetings	Role model at regional and national meetings
Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation	Self-mastery	Self-mastery	Serve as role model	Serve as role model	Serve as role model

Table 6

Systems-based Practice: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

Residents are expected to:	PGY-1	PGY-2	PGY-3	PGY-4	PGY-5
Work effectively in various health care delivery settings and systems relevant to their clinical specialty	Work effectively at LICH and UHB/ KCHC	Work effectively at LICH and UHB/ KCHC	Work effectively at VAMC	Work effectively at Maimonides Hospital	Mastery
Coordinate patient care within the health care system relevant to their clinical specialty	Participate in team	Participate in team	Coordinate with supervision	Progressive responsibility	Mastery
Incorporate considerations of cost awareness and risk-benefit analysis in patient and or population-based care as appropriate	Understand and consider	Understand and consider	Incorporate	Incorporate	Incorporate
Work in interprofessional teams to enhance patient safety and improve patient care quality	Attend dept. M&M; Program evaluation committee	Attend dept. M&M; Program evaluation committee	Present at dept. M&M; Program evaluation committee; Residency Selection Committee	Present at dept. M&M; Program evaluation committee; Residency Selection Committee	Lead and present at dept. M&M; Program evaluation committee; Residency Selection Committee
Participate in identifying system errors and implementing potential system solutions	—	Patient Safety Committee at KCHC	Residents Fellows Subcommittee of GMEC at UHB	Residents Fellows Subcommittee of GMEC at UHB	Root Cause Analyses (pm)
Advocate for quality patient care and optimal patient care systems	Yes	Yes	Yes	Yes	Yes
Be familiar with ethical, socioeconomic, and medico-legal issues that affect the provision of quality and cost-effective care and the utilization of resources within the health care system; the provision of quality and cost-effective otolaryngology care within the context of the health care system; and the use of resources of that health care system, other medical specialists, information technology, CME, and ongoing analysis of clinical outcomes to ensure such care					



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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 SUNY Downstate Medical Center, 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 SUNY Downstate Medical Center, 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.

Core Year (MS3) Elective in Otolaryngology: Third year students will follow the daily schedule of the residents, seeing patients with them and attending the departmental conferences. All students must attend the rotation every day for the full day unless they have prior permission from the supervising attending to be absent. They are required to read in depth about two diseases or clinical problems and be prepared to discuss these with the supervising attending or resident.

Students will be assessed by their supervising attendings based on their attendance, professional behavior, self-directed learning, and progress toward achieving the objectives of the rotation. It is expected that the attending will seek input into the assessment from the residents or fellows on the service.

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 including weekly grand rounds at SUNY Downstate Medical Center, 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, MPH (coordinator of medical student programs) and Richard M. Rosenfeld, MD, MPH (departmental chairman).



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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 8 workstation laboratory was maintained at the 134 Atlantic Avenue location, until the closure of that site in 2014. A new, State-of-the-Art lab is planned for the SUNY site. It will be located on the 7th floor near the departmental offices and will be available for resident use at any time of day or night for self-directed or small group sessions. The lab is intended to be used as a specialty-wide surgical education resource and will include instruments for microvascular training and soft-tissue repair. It is hoped that the lab will be used for frequent courses and educational sessions. Significant funding for the lab has been promised by the Medical School and the University President, and a charitable account has been set up to raise the additional money that will be needed to make the project a reality. It is hoped that construction can begin in late 2015.

In the meantime, we have arranged with our colleagues at the NYU Department of Otolaryngology to use their lab at Bellevue Hospital for our yearly course. This two-day course was given to all the residents and provided an excellent educational opportunity.

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SUNY Downstate Department of Otolaryngology
Presents the **Annual Frank E. Lucente**

ALUMNI AND RESIDENT RESEARCH DAY

Thursday, June 4, 2015 ★ 8:30 am to 4:00 pm

SUNY Downstate Hospital, 395 Lenox Road, Alumni Auditorium

Conference Chair

Sydney Butts, MD
Assistant Professor of Otolaryngology
Chief of Facial Plastic Surgery Division
SUNY Downstate Medical Center

Invited Faculty

Marion Everett Couch,
MD, PhD, MBA, FACS
Richard T. Miyamoto Professor
and Chair
Department of Otolaryngology –
Head & Neck Surgery
Indiana University (IU) School of
Medicine



Gady Har-El, MD, FACS
Professor of Otolaryngology and
Clinical Neurosurgery
SUNY Downstate Medical Center
Chief of Head and Neck Surgery
and Oncology
Lenox Hill Hospital



SUNY Downstate Faculty

Marina Boruk, MD
Assistant Professor

Eli Gordin, MD
Assistant Professor

Frank E. Lucente, MD
Professor and Former Chairman

Richard M. Rosenfeld, MD, MPH
Professor and Chairman

Joshua Silverman, MD, PhD
Assistant Professor

Krishnamurthi Sundaram, MD
Assistant Professor

SUNY Downstate Residents

Jason Abramowitz, MD
Hamid Arjomandi, MD
Marisa Earley, MD
Elizabeth Floyd, MD
Lyuba Gitman, MD
Scott Harris, MD
Lee Kaplowitz, MD
Nikita Kohli, MD
Sean Lewis, MD
Colleen Plein, MD
Punam Thakkar, MD
Jason Wasserman, MD



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ALUMNI AND RESIDENT RESEARCH DAY

SUNY Downstate Medical Center – June 4, 2015

AGENDA

- 8:30 AM Registration & Coffee**
- 9:00** Welcome Remarks — S Butts
- 9:05** Introduction – R Rosenfeld
- 9:10** Introduction – F Lucente
- 9:15** Metabolic derangements in head and neck cancer – M Couch
- 10:10** Skull Base Surgery in the US: 1965 to 2015, and in Brooklyn: 1985 to 2005 – G Har-El
- 11:00 Coffee Break**
- 11:30** John Conley, MD Presentation - M Earley (PGY5), S Harris (PGY5)
- 11:55** An unusual case of foreign body aspiration: dislodged tracheostomy tube – N Kohli (PGY2), J Silverman
- 12:04 PM** A Nasal mass in a neonate diagnosed in utero - Lee Kaplowitz (PGY2), S Butts, J Silverman
- 12:13** Adverse event reporting for proton pump inhibitor therapy – J Abramowitz (PGY2), R Rosenfeld
- 12:22** A Rat Model of Postobstructive Pulmonary Edema – H Arjomandi (PGY3), Richard Kolmar, J Silverman, K, Sundaram, M Stewart
- 12:37** Reconstructive surgery of the head and neck in patients with high cumulative doses of pre-operative radiation, E Gordin
- 12:50 Lunch**
- 1:50** Peri-operative pain management of mandibular fractures: A systematic review of the literature - E Floyd (PGY3), S Butts, E Lai, R Rosenfeld, T Doerr
- 2:03** Systematic review of surgical management for pediatric tracheocutaneous fistula closure – S Lewis (PGY4), R Rosenfeld
- 2:16** Epidemiological Factors Associated with the Prevalence of Orofacial Clefting in New York City – L Gitman, (PGY3), S Butts; M Joseph, S Reynolds
- 2:29** The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis: A Systematic Review – J Wasserman (PGY4), M Boruk, R Rosenfeld
- 2:42** Development of a rat model for persistent vocal fold paralysis due to recurrent laryngeal nerve crush – P Thakkar (PGY4), J Silverman, K Sundaram, R Kollmar
- 2:55** Systematic Review of Tinnitus Outcomes – Colleen Plein (PGY5), R Rosenfeld
- 3:08** Perceptual assessments of VPD by otolaryngology residents – S Butts
- 3:25** “Integration, not Balance” – M Couch
- 3:55** Closing Remarks – S Butts
- 4:00 Adjourn**

ABSTRACTS FOR RESIDENT PRESENTATIONS 2015

11:30AM

Ferzli GS, M.D. Harris S, Cannady SB

Frequency and indications for rotational flap use after completion of a head and neck reconstructive fellowship

Objective: Free-tissue transfer flaps have evolved into the first line approach for head and neck reconstruction of locally advanced tumors in our modern era. The aim of the study is to demonstrate when traditional rotational flaps should be utilized. Specifically, we will address the paradigm of utilizing traditional rotational flaps in a new head and neck reconstructive practice.

Methods: A retrospective review of the consecutive reconstructive cases of a recently trained reconstructive head and neck surgeon from 2009-2013 was performed. Indications for use of rotation flaps were assessed in the context of demographic information and comorbidities.

Results: Fifty-three traditional rotational flaps were performed in forty-two patients. The mean age of the patients was 63 years old. The reconstruction surgeries performed, in order of frequency, included pectoralis major (73.6%), deltopectoral (11.3%), latissimus dorsi (5.4%), temporoparietal fascia (5.4%), sternocleidomastoid and tongue flaps (1.9% each). Rotational flaps were most frequently used as initial flap choice (23), as second choice intraoperatively for poor flap candidate status (12), after failed initial free flaps (8), with upfront initial free flap (5), or with free flap at salvage procedure for failed flap (2), and lastly for wound breakdown but living free flap (3).

Conclusions: While the current era and training of modern head and neck surgeons is focused on free tissue transfer for advanced defects, the teaching and application of rotational approaches is still fundamental in select cases.

11:55PM

Kohli N, Plein C, Silverman J

An unusual case of foreign body aspiration: dislodged tracheostomy tube

Objective: Foreign body aspiration is a common occurrence among the pediatric population. Here we present the interesting case of a 7-year-old female presenting with aspiration of a dislodged tracheostomy tube.

Case Description: A 7-year-old female with a history of Aicardi syndrome (agenesis of the corpus callosum, seizures, and chorioretinal lacunae) and tracheostomy tube placement 2 years ago presented to the emergency department after sudden onset of respiratory distress. According to the patient's mother, she was suctioning the patient's tracheostomy tube when she observed the tracheostomy tube dislodge from the outer phalange. The patient went into immediate respiratory distress and was subsequently intubated on the scene by EMS personnel. In the ED, the patient was intubated and sedated with a normal examination of the ears and nose. Given the patient's history of Aicardi syndrome, she had extensive contractures of the hands, legs, and feet. Examination of the neck revealed a 4.0 pediatric tracheostomy phalange but no connection to the tube. Decreased right sided breath sounds were noted on auscultation of the lungs. The stoma was patent and fiberoptic examination through the stoma revealed a white foreign body at the entrance to the right mainstem bronchus. Findings on chest x ray included radio-opaque foreign body appearing consistent with a dislodged tracheostomy tube in the right mainstem bronchus.

The patient was taken to the operating room for a direct laryngoscopy, bronchoscopy, removal of foreign body, and tracheostomy tube change. Bronchoscopy confirmed findings on chest x ray and fiberoptic examination. Alligator forceps were used to extract the foreign body at the right mainstem bronchus without complications. The old tracheostomy stoma was dilated and a new 4.0 pediatric tracheostomy tube was placed without complications. The patient tolerated the procedure well.

Conclusions: Foreign body aspiration can be a deadly event, particularly in the pediatric population. The majority of foreign bodies in the tracheobronchial tree are found in the right mainstem bronchus due to its shorter and more vertical course. Rigid bronchoscopy is the standard of care for removal. The above case presents an unusual circumstance of a tracheostomy tube that caused a respiratory event during routine suctioning. The first case of a fractured metallic tracheostomy tube was first reported in 1960. Since then, a review of 9 cases involving fractured tracheostomy tubes was published in 1987. In many of these cases, fracture of the tube was attributed to prolonged wear and tear. As listed in the above report, the patient's tracheostomy tube had not been changed in over 2 years. Prompt care of the tracheostomy and routine tracheostomy tube changes should be performed to prevent such complications.

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12:04PM Kaplowitz L, Butts SB, Silverman J
A nasal mass in a neonate diagnosed in-utero

Objective: To describe a nasal mass that has only been described once before in the literature
Methods: Case report including prenatal imaging, and post partum images

Results: N/A

Conclusions: Hairy polyp is a rare cause of congenital nasal mass previously described once in the literature. This case report serves to better define this entity and includes imaging that has never been reported in ENT literature.

12:13PM Abramowitz JM, Thakkar P, Isa A, Truong A, Park C, Rosenfeld RM
Adverse event reporting for proton pump inhibitor therapy

Objective: To determine the effect size of, and risk factors for, adverse events of proton pump inhibitor therapy in systematic reviews of antireflux therapy

Methods: Systematic review (overview) using PRISMA reporting standards of English language meta-analyses and systematic reviews of proton pump inhibitor therapy for reflux disease. Two independent investigators assessed study eligibility, rated the review quality using AMSTAR criteria, and abstracted data for adverse events.

Results: Of 1526 initial studies 33 systematic reviews met inclusion criteria. The most commonly reported adverse events were community acquired pneumonia with a greater association noted with shorter duration of therapy and higher doses (pooled odds ratio [OR] ranging from 1.04 to 1.92). The second most commonly reported AE was bone fractures. In addition to an association with particularly hip fractures (pooled OR 1.16 to 1.5), studies suggest an increased associated risk with longer term therapy. The third most common reported AE was enteric infection with near unanimous association between ppi therapy and clostridium difficile infection (pooled OR 1.69 to 1.33). Other reported AE's include electrolyte and vitamin deficiency.

Conclusions: Our overview shows that proton pump inhibitor therapy is associated with significant, and potentially serious, adverse events that should be discussed with patients, especially when longer term therapy is planned. The effect size and risk factors we provide should facilitate this discussion and promote shared decision making.

12:22PM Arjomandi H, Nakase K, Kolmar R, JSilverman J, Sundaram K, Stewart M
A Rat Model of Postobstructive Pulmonary Edema

Objective: Pulmonary edema resulting from obstructive apnea has been hypothesized as a cause of sudden unexpected death in epilepsy (SUDEP). Here we report the development of a novel rat model of postobstructive pulmonary edema.

Methods: Adult male Sprague Dawley rats were anesthetized with urethane. Head-out plethysmography and quantitative video laryngoscopy were performed to assess baseline respiration and vocal cord function. Simultaneous ECG and pulse-oximetry recordings were collected throughout each experiment. Each animal underwent surgery to place a tracheotomy tube. In the experimental group (n=15), the tracheotomy tube was then completely obstructed until respiratory arrest, followed by chest compression to resuscitate. In the control group (n=6), the animal was observed for 100 seconds without obstruction of the tracheotomy tube. For both groups, ECG and pulse-oximetry were then recorded for another 15 min until sacrifice.

Results: All experimental animals went into respiratory arrest within two minutes after the onset of tracheal obstruction (60 to 135 s, mean = 91.2 s). Oxygen saturation dropped as low as 20% during the obstruction, but recovered rapidly during resuscitation. Post resuscitation, however, there was a second severe drop in oxygen saturation that recovered much more slowly and in some cases incompletely over 15 minutes.

Conclusions: We have developed a rat model of transient upper airway obstruction that exhibits symptoms of severe and prolonged hypoxemia post obstruction. We are now quantifying the anatomical and histological evidence for postobstructive pulmonary edema and testing interventions that may be developed into practical emergency tools.

1:50PM Butts SC, Floyd E, Lai E, Rosenfeld R, Doerr T
Peri-operative pain management of mandibular fractures: A systematic review of the literature

Objective: The control of pain associated with fractures of the mandible is an important treatment

outcome that impacts function, compliance, patient comfort and satisfaction. Pain control has been studied extensively for procedures in other surgical specialties. These studies have focused on protocols incorporating agents that aim to improve analgesic efficacy and to minimize adverse reactions. This review aims to explore the pain management protocols reported in studies of mandibular fractures, including the reporting of quality of life measures.

Study Design: Systematic Review

Methods: Randomized control trials (RCTs) of the operative management of mandible fractures in adult patients (>16 years) were reviewed. Searches of electronic databases included Pubmed/Medline, EMBASE, Cochrane CENTRAL, and clinicaltrials.gov during the time period 1970 to present. Open and closed methods of fracture management were included. All mandibular sites were included. Studies excluded were reports of patients with other facial fractures and those lacking adequate follow up (minimum of one post-operative visit). We followed PRISMA reporting standards and used two independent investigators to assess study eligibility and to extract data. The primary outcome measures reviewed were type of analgesic prescribed, associated adverse side-effects, method of pain assessment and utilization of quality of life measures. A pain attentiveness score(PAS) was assigned to each study based on three criteria that rated the comprehensiveness of information related to pain management reported. Several variables (geographic region, author specialty, year of publication, type of procedure studied) were reviewed to determine the factors that predict reporting of pain-related data. Risk of bias assessments were performed using the Cochrane Collaboration's domain-based evaluation method.

Results: The initial search identified 111 articles, of which 38 met inclusion criteria.

Among reviewed studies the procedures reported were: MMF only in 16%, ORIF only in 52% and ORIF and MMF in 31%. The study authors were from multiple regions including the US (13%), Europe (26%), Asia (45%) and Africa 13%. Pain protocols were described in 16% of studies and the specific analgesic prescribed reported in only 13%(acetaminophen 5%, acetaminophen/NSAIDs 8%). 34% of studies reported pain assessments and 13% included QOL measures. Geographic region was the only variable that predicted pain attentiveness with studies from Europe and Asia most likely to have a high PAS score. A high PAS rating was most common in Europe (30%) while a low rating was least common in the US (40%); ($P=.047$ Fisher's exact test). The majority of studies had unclear or high risks of bias in the key domains assessed.

Conclusions: Pain management is a neglected outcome in randomized control trials of mandibular trauma--84% do not describe their protocol and 87% do not describe the specific analgesics used. Many more RCTs (34%) assessed pain levels among patients but without providing information about the agents prescribed. The incorporation of validated pain measures and QOL scores in future studies of mandibular trauma would focus attention on this key outcome measure, as would trials comparing different analgesic regimens among patients.

2:03PM

Lewis S, Arjomandi H, Rosenfeld RM

Systematic review of surgical management for pediatric tracheocutaneous fistula closure

ctive: Compare the treatment outcomes for surgical approaches for closure of pediatric tracheocutaneous fistulas. Surgical treatment options compared are excision and primary closure with or without a drain and excision and healing by secondary intention. Outcomes evaluated primary outcomes of need for revision/further surgery, need for urgent airway, pneumothorax/emphysema. Secondary outcomes were infection, dehiscence

Methods: Systematic review using PRISMA protocol. Medline, Embase, Cochrane library, and "Reference" sections were used to identify articles. Inclusion criteria was age < 18, data on surgical treatment of TCF, and data of success and complications of surgical treatment of TCF. Exclusion criteria were age > 18, duplicate patient series, or case series less than 2 patients, or case report.

Results: Outcomes evaluated primary outcomes of need for revision/further surgery, need for urgent airway, pneumothorax/emphysema. Secondary outcomes were infection, dehiscence. 2 independent reviewers identified 104 articles, 20 which were included in full text review. 14 articles were included in the study. There were 413 patients that were treated with excision with primary closure and 401 had successful closure, but with 35 complications. There were 233 patients treated with excision with closure by secondary intention and 217 had successful closure. There were 22 complications.

Conclusion: I cannot make a conclusion because I have not done a statistical analysis.

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2:16PM

Gitman L, Butts S, Joseph M; Reynolds S; Zhao H, Patel P
Epidemiological Factors Associated with the Prevalence of Orofacial Clefting in New York City

Objectives/Specific Aims: 1. We aim to determine temporal changes in cleft prevalence. We will focus on prevalence rates before and after folate supplementation by expectant mothers became widely adopted (1992) and subsequent folate fortification of grains (1998) was mandated in US. We hypothesize that the rates of clefting have decrease since these public health initiatives
 2. We aim to define characteristics of mothers of orofacial cleft infants who smoked; 10 years ago the NYC Council enacted a sweeping smoking ban in many public places. We hypothesize that there will be a decrease in the percentage of infants with clefts born to mothers who smoke since this ban enacted.
 3. To define the maternal health factors that increase clefting rates among infants, focusing on rates of obesity, pre-conception diabetes, and gestational diabetes.
 4. To define the association of an orofacial cleft diagnosis with the presence of other congenital anomalies or syndromes. Patients with an OFC and another major congenital malformation have higher levels of morbidity, cleft severity, and infant mortality.

Methods: Epidemiologic study: database review (Congenital Malformations Registry), cross-sectional study. A review of all cases of OFC in New York City over a thirty-year review period (1983-2010), which yields about 3500 cases. The Congenital Malformations Registry sent a complete data set pulled from the database. The full data set now needs to be organized and the goal will be to extract the points that are important to each of the aims of the study (see above), and enter it onto data collection forms as well as assist with data analysis. The final data will also be analyzed by the public health faculty.

Results: A total of close to 3500 cases have been sent from the CMR for review, spanning from 1983 to 2010. They are currently under review and data analysis.

Conclusions: Conclusions are pending the data analysis. Thus far we have been able to exclude census tracts as part of the final analysis, however final analysis and conclusions are pending

2:29PM

Wasserman J, Kaplowitz L, Boruk M, Rosenfeld R
The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis: A Systematic Review

Objective: The use of corticosteroids in the treatment of orbital complications of acute sinusitis remains controversial with no substantial data exploring its efficacy and safety, although it is often prescribed during the course of a patient's treatment

Our hypothesis is that corticosteroids decrease inflammation and edema, facilitating sinus drainage and improving time to recovery and subsequently decreasing hospitalization time and improving outcomes in patients suffering from orbital complications of acute rhinosinusitis. To test this hypothesis, we propose a study with the following specific aims

Review the incidence of complicated acute pediatric sinusitis.

Determine the prevalence of perioperative steroid use in orbital complications of acute bacterial rhinosinusitis via literature search as well as survey to ARS and ASPO members.

Determine side effects, if any, associated with prescribing steroids for complicated acute bacterial sinusitis.

This study will provide insight into the current best evidence regarding the role that corticosteroids play in the treatment of orbital complications of acute rhinosinusitis and will assess our confidence in that evidence.

Methods:

1. Search literature and document search strategy. Query via survey members of ASPO and ARS.
2. Determine which articles meet selection criteria.
3. Assess the quality of articles to be combined.
4. Extract data for predetermined endpoints.
5. Create summary tables to describe source articles.
6. Statistically combine data & assess homogeneity.
7. Perform a sensitivity analysis.
8. Discuss clinical significance and implications.

Result: MeSH Terms appropriate for our study are "Adrenal Cortex Hormones", "Orbital diseases" and "Paranasal Sinus Diseases". Using "and" and "or" modifiers, 4180 results were yielded. Inclusion/exclusion criteria applied and only 2 studies were accepted for data extraction. Survey results are still pending. **Conclusions:** The use of corticosteroids in treating orbital complications of acute sinusitis is prevalent. Literature search shows limited data to support this practice. This study has implications for the management of this disease and also identifies area for further research.

2:42PM

Thakkar P, Harris S, Balasubramanian S, Shuminov R, Stewart M, Nakase K, Silverman J, Sundaram K, Kollmar R
Development of a Rat Model for Persistent Vocal Fold Paralysis due to Recurrent Laryngeal Nerve Crush

Objective: Unilateral vocal-fold paralysis is a major complication from thyroid surgery and commonly results from trauma to the recurrent laryngeal nerve (RLN). The loss of tone in the intrinsic muscles of the larynx due to RLN injury can eliminate voice, produce breathing difficulties, and significantly increase risk for aspiration. For crush injuries to the RLN, the only non-invasive treatment currently available is “watchful waiting” for spontaneous regeneration of axons and reinnervation of laryngeal muscles, which is inefficient and can take many months. As a first step towards developing an animal model for testing drug treatments to promote RLN regeneration, we investigated which crush conditions result in persistent rather than transient vocal-fold paralysis in the rat.

Methods: The right RLN was crushed in 36 eight-week-old male Sprague-Dawley rats. The first experimental variable was the degree of exposure of the RLN—it was either skeletonized completely at the crush site or left attached to the inferior thyroid artery as a ‘neurovascular bundle’. The second experimental variable was the severity of the crush—it was varied by using a range of surgical tools with closing forces between 0.15 and 28 N. Sham surgery and RLN transection were conducted as negative and positive controls, respectively. Vocal fold motion was recorded by using quantitative video laryngoscopy immediately before, during, and at 1, 2, 4, 8, and 16 weeks after injury.

Results: All but the mildest RLN crushes as well as transection resulted in immediate paralysis of the right vocal fold. In most animals, vocal fold motion recovered spontaneously within two weeks after injury, even if the RLN appeared flattened and translucent at the time of injury. Persistent paralysis up to 16 weeks was only observed with crush forces greater than 16 N or after transection. Persistent paralysis was also more likely if the skeletonized RLN was crushed rather than the neurovascular bundle. In some cases, however, the vocal fold paralysis resolved itself within two weeks even for skeletonized RLNs crushed with the greatest force.

Conclusion: The RLN of the rat is remarkably impervious to crush injury, despite or possibly because of its small diameter (less than 0.5 mm). Additional experiments to refine our crush protocol are underway with the goal to produce persistent paralysis in a reproducible fashion. We are also conducting histological experiments to correlate the degree of vocal fold paralysis with the degree of tissue damage as defined by Sunderland in his classification of nerve injuries.

2:55PM

Plein C, Harounian J, Irizarry R, Ferzli G, Floyd E, Kidwai S, Rosenfeld R
Systematic Review of Eligibility and Outcomes in Tinnitus Trials

Outcome Objectives: Analyze existing tinnitus treatment trials with regards to eligibility criteria, outcome measures, study quality and external validity. Recognize the effect of patient demographics, symptom duration, severity and otologic comorbidity on the application of tinnitus research findings to individual patient encounters

Methods: We conducted a systematic review of randomized controlled trials for tinnitus interventions. Articles were assessed for eligibility using Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol and data were extracted by 2 independent investigators. Studies were assessed for methodological quality, inclusion and exclusion criteria, patient demographics and outcome measures.

Results: The final data set included 147 randomized trials. Nearly all studies took place in a specialist setting. Over 50% did not explicitly define tinnitus and 44% used a subjective severity threshold such as “severely disturbing.” 54% required symptom duration of at least 6 months for study eligibility and up to 33% excluded patients with “organic” hearing loss or otologic conditions. Mean age was 52.2 years, and median follow up was 3 months. Of included studies, only 20% had a low risk of bias.

Conclusion: Randomized trials of tinnitus interventions are most applicable to older adults with tinnitus lasting 6 months or longer who are evaluated in specialty settings. The limitations in methodology, follow up (50% less than 3 months), and outcome reporting raise concerns about the validity of findings and may influence how clinicians apply trial results to individual patients and establish treatment expectations.

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ANNUAL FRANK E. LUCENTE ALUMNI AND RESIDENT RESEARCH DAY



Frank E. Lucente, MD, former chair and Professor Emeritus (right), at the podium and residents Scott Harris and Marisa Earley from the left



Lystra Cudjoe, staff (L) and Nicole Fraser (R), staff



Marion Everett Couch, MD, PhD, MBA, Invited Faculty



Residents during lunch break



(L to R) Frank E. Lucente, MD, former chairman and professor emeritus, Marion Everett Couch, MD, PhD, MBA, Invited Faculty, Sydney C. Butts, MD, Faculty and Conference Chair, Gady Har-El, MD, Invited Alumnus

THE 5TH ANNUAL Multidisciplinary Head and Neck Symposium: Update on Head and Neck Cancer and Surgery

*Highlighting Transoral Robotic Surgery and
Oropharyngeal Cancer*

FRIDAY, DECEMBER 5, 2014

Faculty

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Associate Professor, Department
of Speech-Language Pathology
New York Medical College

Richard M. Rosenfeld, M.D., M.P.H., F.A.A.P

Professor and Chairman
Department of Otolaryngology,
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Attending Physician, Division of
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Joshua Silverman, M.D., Ph.D.

Assistant Professor,
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Director, Pediatric
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Attending Physician, Division of
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New York Methodist Hospital

Alexandra Soyfer, MS, CCC-SLP

Senior Speech-Language
Pathologist, Barrique SLP
@ Center for Swallowing &
Speech-Language Pathology
New York Methodist Hospital

Krishnamurthi Sundaram, M.D., F.A.C.S.,

Director, Center for Head
and Neck Surgery, New York
Methodist Hospital
Clinical Professor and
Vice-Chairman, Department
of Otolaryngology, SUNY
Downstate Medical Center
Director, Center for Head
and Neck Surgery, New York
Methodist Hospital

Hani Ashamalla, MD, FCCP

Chairman, Department of
Radiation Oncology
New York Methodist Hospital

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The Fifth Annual Multidisciplinary Head And Neck Symposium: Update On Head And Neck Cancer And Surgery

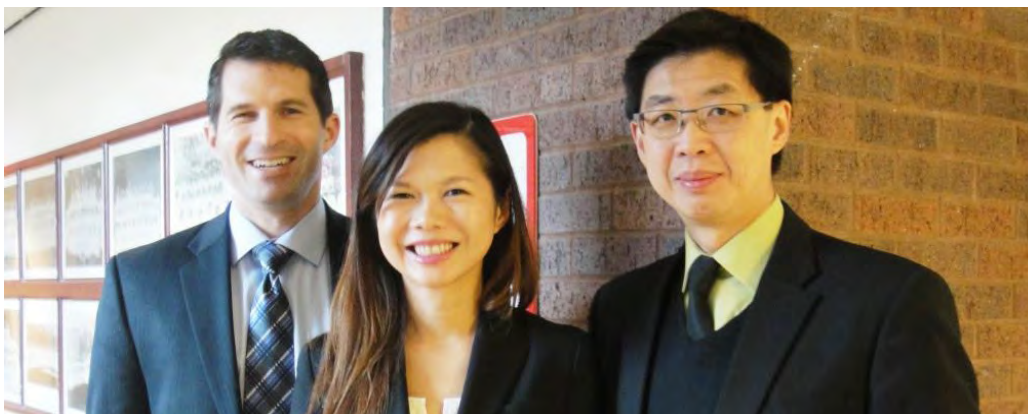
Highlighting Transoral Robotic Surgery And Oropharyngeal Cancer

Agenda

7:30-8:00 AM	Registration and Continental Breakfast
8:00-8:05	Inauguration
7:30 – 8:00	Registration and Continental Breakfast
8:00 – 8:05	Welcome
	Stanley Sherbell, M.D., Executive Vice-President for Medical Affairs, New York Methodist Hospital
8:05 – 8:10	Program Introduction
	Richard Rosenfeld, M.D., M.P.H., F.A.A.P.
8:10 - 8:15	Remarks
	Gady Har-El, M.D., F.A.C.S.
Session 1	Robotic Surgery and Oropharyngeal Cancer
8:15 – 8:55	Surgery for Oropharyngeal Cancer Jeremy Richmon, MD
8:55 – 9:35	De-Intensification Strategies in Head and Neck Cancer Harry Quon, MD, MS
9:35 – 9:55	Cancer and the HPV Virus Alice Lin, MD
9:55 – 10:10	Coffee break
10:10– 10:35	Chemotherapy for Oropharyngeal Cancer Alan Dosik, MD
10:35 – 11:00	Understanding Speech-Language Pathology Services for Dysphagia: Diagnostics Luis Riquelme, PhD, CCC-SLP, BCS-S Alexandra Soyfer, MS, CCC-SLP
11:00 – 11:30	Panel Discussion: Oropharyngeal Cancer Panel: Harry Quon, MD, Jeremy Richmon, MD, Krishnamurthi Sundaram, MD, Alan Dosik, MD Moderator: Natalya Chernichenko, MD
11:30–12:30pm	Lunch
Session 2	Principles of Head and Neck Cancer and Surgery
12:30 – 12:55pm	Pediatric Head and Neck Masses Joshua Silverman, MD, PhD
12:55 – 1:20	Update to Endoscopic Approaches to the Anterior Skull Base Marina Boruk, MD
1:20 – 1:45	Perineural Invasion in Head and Neck Cancer Natalya Chernichenko, MD
1:45 – 2:05	Reconstructive Pearls in the Head and Neck Eli Gordon, MD
2:05 – 2:10	Closing Remarks Alice Lin, M.D.

The program thanks all participants, especially Rivi Har-El, PhD, RPT & Gady Har-El, MD, FACS.

ANNUAL HEAD AND NECK CONFERENCE AT NEW YORK METHODIST HOSPITAL



(L to R) Jeremy Richmon, MD, Invited Faculty, Alice Lin, MD, Faculty and Conference Chair and Harry Quon, MD, Invited Faculty



(L to R) Natalya Chernichenko, MD, Faculty, Gady Har-El, MD, Faculty and Krishnamurthi Sundaram, MD, Faculty



(L to R) Carole Facciponti, staff, Richard M. Rosenfeld, MD, MPH, Professor and Chairman, and Jane Van Roten, staff



(L to R) Alice Lin, MD, Faculty and Conference Chair and Dr. Wu



(L to R) Mohsen Habib, MD, Faculty, Krishnamurthi Sundaram, MD, Faculty and Hamid Arjomandi, MD, Resident

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ANNUAL HEAD AND NECK CONFERENCE AT NEW YORK METHODIST HOSPITAL



Conference Attendees



Stanley Sherbell, MD, Chief Medical Officer at NY Methodist Hospital at the podium



Conference Attendees



Conference Attendees

GRAND ROUNDS 2014-2015

CONFERENCE	DATE	TIME	SPEAKER
Resident Orientation	7/3/14		
Research Review and Methodology: Review of the Review Grid	7/10/14	6:30 – 7:50	Nira Goldstein, MD
Larynx/Dysphonia/Dysphagia	7/10/14	7:00 – 7:50	Boris Bentsianov, MD
Embryology of the Head & Neck	7/10/14	8:00 – 8:50	Jessica Lim, MD
Multidisciplinary Head and Neck Tumor Board	7/10/14	9:00 – 9:50	Gady Har El, MD N. Chernichenko, MD A. Lin, MD P. Han, MD D. Reede, MD K. Sundaram, MD
ACGME – Related Discussion Duty Hours/Depart. Escalation	7/17/14	6:30 – 7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Local Grafts and Flaps	7/17/14	7:00 – 7:50	Sydney Butts, MD
Nasal/Sinus physiology	7/17/14	8:00 – 8:50	Richard Westreich, MD
COCLIA	7/17/14	9:00 – 9:50	Marisa Earley, MD
Complications of Tracheotomy	7/24/14	6:30 – 7:00	Jason Abramowitz, MD
Microbiology & Antibiotics In Otolaryngology	7/24/14	7:00 – 7:50	Richard Rosenfeld, MD
Morbidity & Mortality Conference	7/24/14	8:00 – 8:50	
Multidisciplinary Tumor Board	7/24/14	9:00 – 9:50	Gady Har El, MD N. Chernichenko, MD A. Lin, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Mentor Meetings	7/31/14	6:30 – 7:00	Faculty & Residents
Basic Science Review: Hearing and Balance Physiology	7/31/14	7:00 – 7:50	Matthew Hanson, MD
Audiogram/OAE	7/31/14	8:00 – 8:50	John Weigand, AuD, F AAA
Mock oral boards	7/31/14	9:00 – 9:50	Marina Boruk MD
Core Competency and Residency Issues	8/7/14	6:30 – 7:00	Nira Goldstein, MD
Etiology & Therapeutic Strategies: Pediatric Illness	8/7/14	7:00 – 7:50	Nira Goldstein, MD
Airway Physiology	8/7/14	8:00 – 8:50	Luis F Riquelme, PhD
COCLIA	8/7/14	9:00 – 9:50	Marisa Earley, MD
Research Review & Methodology: Resident Research Opportunities in Otolaryngology	8/14/14	6:30-7:00	Nira Goldstein, MD
Embryology of the Head & Neck	8/14/14	7:00-7:50	Jessica Lim, MD
Thyroid/Parathyroid	8/14/14	8:00 – 8:50	K. Sundaram, MD
Multidisciplinary Head & Neck Tumor Board	8/14/14	9:00 – 9:50	Gady Har El, MD N. Chernichenko, MD A. Lin, MD P. Han, MD D. Reede, MD K. Sundaram, MDACGME
Related Discussion: Fatigue Management	8/21/14	6:30 – 7:30	Nira Goldstein, MD

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Free Flaps Physiology & Care	8/21/14	7:30 – 8:00	Alice Lin, MD
Morbidity and Mortality	8/21/14	8:00 - 8:50	
COCLIA	8/21/14	9:00 – 9:50	Marisa Earley, MD
Ballistic injuries in the maxillofacial skeleton	8/28/14	6:30 - 7:30	Sean Lewis, MD
Airway Physiology	8/28/14	7:30 – 8:00	Joshua Silverman, MD
Summer school exam and review	8/28/14	8:00 – 8:50	Sydney Butts, MD
Medical Student Presentations (3)	8/28/14	9:00 – 9:50	
Core Competency and Residency Issues: Quality Assurance (QI)	9/4/14	6:30 – 7:00	Richard Rosenfeld, MD
Tinnitus	9/4/14	7:00 - 7:50	Michal Preis, MD
Hearing Aids	9/4/14	8:00 – 8:50	John Weigand, AuD
COCLIA	9/4/14	9:00 – 9:50	Marisa Earley, MD
Research Review & Methodology	9/11/14	6:30 – 7:00	Nira Goldstein, MD
Hearing and NF2: New Paradigms	9/11/14	7:00 – 7:50	J.T. Roland, MD
Journal Club - How to Review a Journal Article	9/11/14	8:00 – 8:50	R. Rosenfeld, MD
Multidisciplinary Head & Neck Tumor Board	9/11/14	9:00 – 9:50	Gady Har El, MD N. Chernichenko, MD A. Lin, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Review of sinus CT's	9/18/14	6:30 – 7:00	Marina Boruk, MD
A Neurologist's approach to Vertigo and Mal de Debarquement Syndrome	9/18/14	7:00 – 7:50	C. Cho, MD, MSCR
Morbidity and Mortality	9/18/14	8:00 - 8:50	Richard Rosenfeld, MD
COCLIA	9/18/14	9:00-9:50	Marisa Earley, MD
Grand Rounds Cancelled – Rosh Hosanna	9/25/14		
ACGME Core Competency & Residency Issues: Medical Knowledge, Practice-based	10/2/14	6:30 – 7:00	Richard Rosenfeld, MD
Learning & Improvement Cochlear Gene Therapy-Is It Time?	10/2/14	7:00 – 7:50	Lawrence Lustig, MD
Deafness in America	10/2/14	8:00 – 8:50	Matthew Hanson, MD
COCLIA	10/2/14	9:00 - 9:50	Marisa Earley, MD
Research Review & Methodology	10/9/14	6:30-7:00	Nira Goldstein, MD
"What is the role of navigation in otologic surgery?"	10/9/14	7:00 – 7:50	Darius Kohan, MD
Journal Club	10/9/14	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	10/9/14	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD P. Han, MD A. Lin, MD D. Reede, MD
Quality Assurance (QI)	10/16/14	6:30 – 7:00	Nira Goldstein, MD
Neuroradiology of the temporal bone	10/16/14	7:00 – 7:50	Azita Khorsandi MD
Temporal bone trauma	10/16/14	8:00 – 8:50	Nikita Kohli, MD
COCLIA	10/16/14	9:00 - 9:50	Marisa Earley, MD
Approaches to the maxillofacial skeleton	10/23/14	6:30 – 7:00	Punam Thakkar, MD

Management of the chronic ear	10/23/14	7:00 – 7:50	George Alexiades, MD
Morbidity and Mortality Conference	10/23/14	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	10/23/14	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD P. Han, MD A. Lin, MD D. Reede, MD
Grand rounds cancelled due to Pediatric Airway Symposium	10/30/14		
ACGME Core Competency & Residency Issues: Professionalism, Interpersonal, And Communication Skills	11/6/14	6:30 – 7:00	Richard Rosenfeld, MD
Ethical dilemmas confronting everyday challenges in your practice	11/6/14	7:00 – 7:50	Robert Ward, MD
Reflux in Children: From Bench Research to Clinical Implications			
Journal Club	11/6/14	8:00 – 8:50	
COCLIA	11/6/14	9:00 – 9:50	Colleen Plein, MD
Research Review	11/13/14	6:30 – 7:00	Nira Goldstein, MD
Cost of Tonsillectomy	11/13/14	7:00 – 7:50	E. Floyd, MD
Pathology Case Review and Discussion	11/13/14	8:00 – 8:50	Raavi Gupta, MD
Multidisciplinary Head & Neck Tumor Board	11/13/14	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD P. Han, MD A. Lin, MD D. Reede, MD
ACGME Related Discussion: Quality Assurance (QI)	11/20/14	6:30 – 7:00	Nira Goldstein, MD
Considerations in Pediatric Imaging	11/20/14	7:00 – 7:50	Peter Assaad, MD
Morbidity and Mortality Conference	11/20/14	8:00 – 8:50	
COCLIA	11/20/14	9:00 – 9:50	Colleen Plein, MD
Grand rounds cancelled due to Thanksgiving	11/27/14		
Faculty Development: Abstract Submission for Mini-Seminars, Instruction Courses, Research Presentations	12/4/14	6:30-7:00	Richard Rosenfeld, MD
Management of Airway Obstruction in Children with Micrognathia	12/4/14	7:00 – 7:50	Andrew Scott, MD
Risk Factors for Orofacial Clefting	12/4/14	8:00-8:50	Lyuba Gitman, MD
COCLIA	12/4/14	9:00-9:50	Colleen Plein, MD
Grand rounds Cancelled - Residency Interviews	12/11/14		
ACGME-related Discussion: Medical Knowledge	12/18/14	6:30 – 7:00	Richard Rosenfeld, MD
Allergic rhinitis and related aeroallergens	12/18/14	7:00 – 7:50	M. Vastardi, MD
Morbidity and Mortality Conference	12/18/14	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	12/18/14	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD P. Han, MD A. Lin, MD D. Reede, MD



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Grand rounds cancelled – Christmas Day	12/25/14		
Grand rounds cancelled – New Years Day	1/1/15		
CT sinus review	1/8/15	6:30 – 7:00	Marina Boruk, MD
Avoiding pitfalls early in practice: strategies for building a successful career in otolaryngology	1/8/15	7:00 – 7:50	Abtin Tabaei, MD
Journal Club	1/8/15	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	1/8/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD P. Han, MD A. Lin, MD D. Reede, MD Nira Goldstein, MD
Research Review and Methodology	1/15/15	6:30 – 7:00	J. Eloy, MD
Operative Nuances in Endoscopic Endonasal	1/15/15	7:00 – 7:50	
Resection of Ventral Skull Base Lesions	1/15/15	8:00 – 8:50	H. Arjomandi, MD
Sublingual Immunotherapy for Allergic Rhinitis			
COCLIA	1/15/15	9:00 – 9:50	Colleen Plein, MD
Faculty Core Clinical	1/22/15	6:30 – 7:00	
Morbidity and Mortality Conference	1/22/15	7:00 – 7:50	
Genetic Counseling for Patients with Craniofacial Anomalies	1/22/15	8:00 – 8:50	K. David, MD T. Wildman, MS
Multidisciplinary Head & Neck Tumor Board	1/22/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
Mentoring Meetings	1/29/15	6:30 - 7:00	Faculty & Residents
Endoscopic Sinus Surgery Technique Course	1/29/15	7:00 - 8:50	Marina Boruk, MD
Mock Oral Boards	1/29/15	9:00 - 9:50	Marina Boruk, MD
ACGME Core Competency & Residency Issues: Residency Goals and Objectives	2/5/15	6:30 – 7:00	Richard Rosenfeld, MD
Indications and Approaches for Surgical Management of Nasopharyngeal Cancer	2/5/15	7:00 – 7:50	Peter Constantino, MD
Application of Virtual Surgical Planning	2/5/15	8:00 – 8:50	Sydney Butts, MD Rob Troetti
COCLIA	2/5/15	9:00 – 9:50	Colleen Plein, MD
Research Review – Study Files/Data Entry	2/12/15	6:30 - 7:00	Nira Goldstein, MD
Lasers and Treatment of Facial Lesions	2/12/15	7:00 - 7:50	Cindy Bae, MD
Journal Club	2/12/15	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	2/12/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
ACGME Related Discussion: Substance Abuse/Disruptive Behavior	2/19/15	6:30 – 7:00	Nira Goldstein, MD
Rhinoplasty	2/19/15	7:00 – 7:50	Eli Gordin, MD
Botox and Injectables	2/19/15	8:00 – 8:50	Jason Abramowitz, MD
COCLIA	2/19/15	9:00 – 9:50	Colleen Plein, MD

Faculty Core Clinical: Resident Continuity of Care	2/26/15	6:30 – 7:00	
Morbidity and Mortality Conference Tumor Board	2/26/15	7:00 – 7:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
Resident Inservice Review/Jopardy	2/26/15	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	2/26/15	9:00 – 9:50	
ACGME Core Competency & Residency Issues: Patient Care, Work Hours	3/5/15	6:30 – 7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Local Flaps in Mohs Reconstruction	3/5/15	7:00 – 7:50	Rebecca Fraioli, MD
Journal Club	3/5/15	8:00 – 8:50	
COCLIA	3/5/15	9:00-9:50	Scott Harris, MD
Research Review & Methodology	3/12/15	6:30 – 7:00	Nira Goldstein, MD
Evidence Based Approach to Optimizing Perioperative Free Flap Outcomes	3/12/15	7:00 – 7:50	Lee Kaplowitz, MD
Combined Otolaryngology and Pathology	3/12/15	8:00 – 8:50	Raavi Gupta, MD Edward Heilman, MD
Multidisciplinary Head & Neck Tumor Board	3/12/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
Oculoplastic Cases for the Otolaryngologist	3/19/15	6:45 – 7:45	Roman Shinder, MD
Dental Appliances in the Management of Obstructive Sleep Apnea	3/19/15	8:00 – 8:50	Robert Korngut, DDS
Morbidity and Mortality Conference	3/19/15	8:00 – 8:50	
COCLIA	3/19/15	9:00 – 9:50	Scott Harris, MD
Core Clinical: Facial Trauma Review	3/26/15	6:30 – 7:00	Elizabeth Floyd, MD Lyuba Gitman, MD
Morbidity and Mortality Conference	3/26/15	7:00 – 7:50	
Facelifts in the Aging Face	3/26/15	8:00 – 8:50	Matthew White, MD
Multidisciplinary Head & Neck Tumor Board	3/26/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
Resident Engagement in AAO-HNS SRF and PAC	4/2/15	6:30 – 7:00	Sean Lewis, MD, Nikita Kohli, MD Hamid Arjomandi, MD
Vocal Fold Injury and Repair: From Bench to Bedside	4/2/15	7:00 – 7:50	Ryan C. Branski, PhD
Journal Club	4/2/15	8:00 – 8:50	
COCLIA	4/2/15	9:00 – 9:50	Scott Harris, MD
Research Review	4/9/15	6:30 – 7:00	Nira Goldstein, MD
20 Years of LPR: Where Are We Now?	4/9/15	7:00 – 7:50	Brian Benson, MD



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Navigating the waters of medical liability: risk management strategies for otolaryngologists	4/9/15	8:00 – 8:50	Virginia Hanson, RN
Multidisciplinary Head & Neck Tumor Board	4/9/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
ACGME Related Discussion	4/16/15	6:30 – 7:00	Nira Goldstein, MD
Morbidity and Mortality Conference	4/16/15	7:00 – 7:50	
Globus: The Perennial Complaint	4/16/15	8:00 – 8:50	Melin Tan-Geller, MD
COCLIA	4/16/15	9:00 – 9:50	Scott Harris, MD
Grand Rounds cancelled due to COSM	4/23/15		
Core Clinical: Neurolaryngology Basics	4/30/15	6:30 – 7:00	Colleen Plein, MD
Establishing a Treatment Paradigm For Early Glottic Cancer	4/30/15	7:00 – 7:50	Sean Lewis, MD
Annual Department Photo	4/30/15	8:00 – 8:30	
COCLIA	4/30/15	9:00 – 9:50	Scott Harris, MD
ACGME Related Discussion: PDSA: Prevention of Hypocalcemia in post-thyroidectomy patients	5/7/15	6:30 – 7:00	Hamid Arjomandi, MD
Evolution to Endoscopic Skull Base Surgery: History, Advances and the Future	5/7/15	7:00 – 7:50	Marc A. Cohen, MD
Journal Club	5/7/15	8:00 – 8:50	
COCLIA	5/7/15	9:00 – 9:50	Scott Harris, MD
Research Review: Overview of Epidemiologic Study Designs	5/14/15	6:30 – 7:00	Nira Goldstein, MD
Parathyroid Glands, Hyperparathyroidism and Parathyroid Surgery	5/14/15	8:00 – 8:50	N. Chernichenko, MD
Head and Neck Radiology Review	5/14/15	9:00 – 9:50	Deborah L. Reede, MD
ACGME Related Discussion: "Opportunities to expand the residency program."	5/21/15	6:30 – 7:00	Richard Rosenfeld, MD
Management of Papillary Thyroid Microcarcinoma: Is Surgery Necessary for All Cases?	5/21/15	7:00 – 7:50	Michael Tuttle, MD
Malignant Melanoma: Staging and Treatment	5/21/15	8:00 – 8:50	Jason Wasserman, MD
COCLIA	5/21/15	9:00 – 9:50	Scott Harris, MD
Core Clinical: Challenging Cases	5/28/15	6:30 – 7:00	
Morbidity & Mortality Conference	5/28/15	7:00 – 7:50	
Medical Student Presentations	5/28/15	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	5/28/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
Annual Frank E. Lucente Alumni & Resident Research Day	6/4/15		
Research Review & Methodology	6/11/15	6:30 – 7:00	Nira Goldstein, MD

Issues in Management of Laryngeal Cancer	6/11/15	7:00 – 7:50	Michael Weiss, MD
Journal Club	6/11/15	8:00 – 8:50	
Multidisciplinary Head & Neck Tumor Board	6/11/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD
ACGME Related Discussion: Systems Based Practice	6/18/15	6:30 – 7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Management of Skin Cancers	6/18/15	7:00 – 7:30	Thomas J. Ow, MD
Survivorship Issues in Head and Neck cancer	6/18/15	8:00 – 8:50	Shrujal Baxi, MD
COCLIA	6/18/15	9:00 – 9:50	Niv Mor, MD
Core Clinical: Challenging Cases	6/25/15	6:30 – 7:00	
Morbidity & Mortality Conference	6/25/15	7:00 – 7:50	
Salvage Surgery for Recurrent Squamous Cell Carcinoma of the Oropharynx	6/25/15	8:00 – 8:50	Punam Thakkar, MD
Multidisciplinary Head & Neck Tumor Board	6/25/15	9:00 – 9:50	Gady Har-El, MD K. Sundaram, MD N. Chernichenko, MD Alice Lin, MD Deborah Reede, MD Peter Han, MD

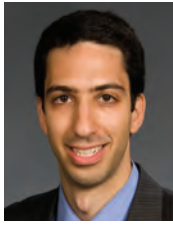
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OTOLARYNGOLOGY RESIDENTS July 1, 2013- June 30, 2014

Fifth 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



Marisa Ann Earley, MD

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

Fourth Year Otolaryngology



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

Third Year Otolaryngology



Elizabeth Floyd, MD

College: George Washington University - 2007

Medical School: SUNY – Health Science Center at Brooklyn– 2012

Internship: SUNY – Health Science Center at Brooklyn – 2013



Lyuba Gitman, MD

College: University of Pennsylvania - 2008

Medical School: Jefferson Medical College - 2012

Internship: UNY – Health Science Center at Brooklyn – 2013



Hamid Arjomandi, MD

College: University of California, Irvine - 2008

Medical School: Keck School of Medicine of the University of Southern California - 2012

Internship: SUNY – Health Science Center at Brooklyn – 2013

Second Year Otolaryngology



Jason Abramowitz, MD

College: City University of New York, Queens College- 2009

Medical School: SUNY – Health Science Center at Brooklyn– 2013

Internship: SUNY – Health Science Center at Brooklyn – 2014



Lee Kaplowitz, MD

College: Cornell University - 2009

Medical School: SUNY – Health Science Center at Buffalo– 2013

Internship: SUNY – Health Science Center at Brooklyn – 2014



Nikita Kohli, MD

College: Northwestern University - 2009

Medical School: University of Virginia – School of Medicine – 2013

Internship: SUNY – Health Science Center at Brooklyn – 2014

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First Year Otolaryngology

Anthony Alessi, MD
College: Stony Brook University - 2009
Medical School: SUNY – Health Science Center at Brooklyn - 2014
Internship: SUNY – Health Science Center at Brooklyn – 2015



George Ferzli, MD
College: Georgetown University - 2009
Medical School: SUNY – Health Science Center at Brooklyn - 2014
Internship: SUNY – Health Science Center at Brooklyn – 2015



Sandra Ho, MD
College: Johns Hopkins University - 2008
Medical School: Jefferson Medical College of Thomas Jefferson University - 2014
Internship: SUNY – Health Science Center at Brooklyn – 2015

**Incoming Residents
(Starting July 1, 2014)**

Daniel Ballard, MD
College: University of Virginia - 2010
Medical School: Eastern Virginia Medical School - 2015
Internship: SUNY – Health Science Center at Brooklyn - 2016



Daniel Sukato, MD
College: Cornell University - 2009
Medical School: University Of Pittsburgh School of Medicine
Internship: SUNY – Health Science Center at Brooklyn - 2016



Derek Wu, MD
College: University of California - 2011
Medical School: Albert Einstein College of Medicine of Yeshiva University
Internship: UNY – Health Science Center at Brooklyn - 2016

GRADUATING RESIDENTS



(L to R) Nira Goldstein, MD, MPH, Associate Program Director, Colleen Plein, MD, Graduating Resident, Scott Harris, MD, Graduating Resident, Marisa Earley, MD, Graduating Resident, and Richard Rosenfeld, MD, MPH, Professor and Chairman



Front Row (L to R): Sean Lewis, MD, Resident, Lyuba Gitman, MD, Resident, Nikita Kohli, MD, Resident, Marisa Earley, MD, Graduating Resident, Elizabeth Floyd, MD, Resident, Jason Abramowitz, MD, Resident and Scott Harris, MD, Graduating Resident
 2nd Row (L to R): Colleen Plein, MD, Graduating Resident, Sandra Ho, MD, Anthony Alessi, MD, Resident, Lee Kaplowitz, MD, Resident and Matthew Hanson, MD, Faculty
 3rd Row (L to R): Marina Boruk, MD, Faculty, Natalya Chernichenko, MD, Faculty, George Ferzli, MD, Resident, Jason Wasserman, MD, Resident, Hamid Arjomandi, MD, Resident, Krishnamurthi Sundaram, MD, and Lee Kaplowitz, MD, Resident
 4th Row (L to R): Richard Kollmar, PhD, Faculty, Alice Lin, MD, Faculty, Nira A. Goldstein, MD, MPH, Faculty, Joshua Silverman, MD, PhD, Sydney Butts, MD, Faculty, Michael Weiss, MD, Faculty, Richard M. Rosenfeld, MD, MPH, Chairman, Boris Bentsianov, MD, Faculty and Eli Gordin, MD, Faculty

DEPARTMENT EVENTS

GRADUATION DINNER AT
THE WATER CLUB

Staff: 3rd row (L to R): Carol, Nicole, Joanne, John Weigand, 2nd row (L to R): Maria, Bibi, Sheneeza, Billy, Andrea and Eslyn, 1st row (L) Sharon, John's wife and Katherine (R), Billy's wife



Hamid Arjomandi, MD and his wife Atousa



(L to R) Resident Lee Kaplowitz, his fiancée Blythe and Anthony Alessi



Staff: (L TO R) Valerie , Elaine, Nadine, Petra and Joanne

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DEPARTMENT EVENTS GRADUATION DINNER AT



Scott Harris, MD (3rd right) and family



Natalya Chernichenk, MD (L) and Jessica Lim, MD (R)



(L to R) Marisa Earley, MD, Michal Preis, MD (Outstanding Teaching Award recipient), Colleen Plein, MD and Scott Harris, MD



(L to R) Dr. Bentsianov's wife Marie, Boris Bentsianov, MD, Sydney Butts, MD and Marina Boruk, MD

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THE WATER CLUB



Staff: Front (L to R) Joanne, Lana, Carol; back (L to R) Petra, Varlerie and Jane



(L to R) Neil Sperling, MD, Michal Preis, MD and Mauro Ruffy, M



(L to R) Colleen Plein, MD, Carole Facciponti (Staff Honoree), Marisa Earley, MD and Scott Harris, MD



(L to R) Joshua Silverman, MD, PhD (Outstanding Teaching Award recipient), Colleen Plein, MD, Marisa Earley, MD and Scott Harris, MD

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DEPARTMENT EVENTS GRADUATION DINNER AT THE WATER CLUB



A glance at the graduation dinner



Frank E. Lucente, MD, former chair at the podium



Incoming residents (L to R) Daniel Sukato, Derek Wu, and Daniel Ballard



Richard M. Rosenfeld, MD, MPH, Chairman presenting gifts to the graduating residents

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Resident Rotation Schedule (Academic Year 2015-2016)

RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2015-2016

		2015				
	KCHC/SUNY	NY M/Bayridge/185 Montague Ave/MEETH	RESEARCH	V/A	MAIMO	NON-OTO PGY-1
JULY	THAKKAR GITMAN KOHLI ALESSI HO	LEWIS ARJOMANDI FERZLI	KAPLOWITZ	WASSERMAN ABRAMOWITZ	FLOYD	BALLARD (NS) SUKATO (BVA) WU (ENT)
AUGUST	THAKKAR GITMAN KOHLI ALESSI HO	LEWIS ARJOMANDI FERZLI	KAPLOWITZ	WASSERMAN ABRAMOWITZ	FLOYD	BALLARD (ENT) SUKATO (CT) WU (KCHC-ONC)
SEPTEMBER	THAKKAR GITMAN KOHLI ALESSI FERZLI	LEWIS FLOYD HO	KAPLOWITZ	WASSERMAN ABRAMOWITZ	ARJOMANDI	BALLARD (KCHC-ONC) SUKATO (ENT) WU (SICU)
OCTOBER	THAKKAR GITMAN KOHLI ALESSI FERZLI	LEWIS FLOYD HO	KAPLOWITZ	WASSERMAN ABRAMOWITZ	ARJOMANDI	BALLARD (ER) SUKATO (KCHC-ONC) WU (ANES)
NOVEMBER	LEWIS ARJOMANDI ABRAMOWITZ HO FERZLI	WASSERMAN FLOYD ALESSI	KOHLI	THAKKAR KAPOWITZ	GITMAN	BALLARD (ANES) SUKATO (ER) WU (UHB-TRANSPLANT)
DECEMBER	LEWIS ARJOMANDI ABRAMOWITZ HO FERZLI	WASSERMAN FLOYD ALESSI	KOHLI	THAKKAR KAPOWITZ	GITMAN	BALLARD (VAC) SUKATO (ANES) WU (UHB-GEN)

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RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2015-2016

	KCHC/SUNY	NYM/Bayridge/185 Montague Ave/MEETH	RESEARCH	2016 VA	MAIMO	NON-OTO PGY-1
JANUARY	LEWIS ARJOMANDI ABRAMOWITZ HO ALESSI	WASSERMAN GITMAN FERZLI	KOHLI	THAKKAR KAPLOWITZ	FLOYD	BALLARD (UHB-GEN) SUKATO (UHB-TRANS) WU (VAC)
FEBRUARY	LEWIS ARJOMANDI ABRAMOWITZ HO ALESSI	WASSERMAN GITMAN FERZLI	KOHLI	THAKKAR KAPLOWITZ	FLOYD	BALLARD (UHB-TRANS) SUKATO (UHB-GEN) WU (NS)
MARCH	WASSERMAN FLOYD KAPLOWITZ FERZLI ALESSI	THAKKAR ARJOMANDI HO	ABRAMOWITZ	LEWIS KOHLI	GITMAN	BALLARD (BVA) SUKATO (VAC) WU (ER)
APRIL	WASSERMAN FLOYD KAPLOWITZ FERZLI ALESSI	THAKKAR ARJOMANDI HO	ABRAMOWITZ	LEWIS KOHLI	GITMAN	BALLARD (CT) SUKATO (ENT) WU (BVA)
MAY	WASSERMAN FLOYD KAPLOWITZ FERZLI HO	THAKKAR GITMAN ALESSI	ABRAMOWITZ	LEWIS KOHLI	ARJOMANDI	BALLARD (SICU) SUKATO (NS) WU (ENT)
JUNE	WASSERMAN FLOYD KAPLOWITZ FERZLI HO	THAKKAR GITMAN ALESSI	ABRAMOWITZ	LEWIS KOHLI	ARJOMANDI	BALLARD (ENT) SUKATO (SICU) WU (CT)

RESIDENCY EXPERIENCE

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 ambulatory 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 UHB, KCHC, and BVAMC as described below:

- UHB rotations: otolaryngology, general surgery, anesthesia, cardiothoracic surgery, transplant surgery, vascular surgery (encompassed in transplant surgery)
- KCHC rotations: otolaryngology, emergency medicine, critical care unit (SICU), neurosurgery, oncology
- BVAMC rotation: general surgery, vascular surgery (encompassed in general surgery)

Typical Procedures Performed During PGY-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 includes two two-months rotation at the New York Methodist Hospital and four two-month rotations at the University Hospital of Brooklyn/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 resident participates in the outpatient clinical care of both pediatric and adult populations and also participates in specialty clinics, such as pediatric, otology, and head and neck oncology.

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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. An introduction to hearing and speech evaluation/therapy is provided by the audiology and speech faculty.

Typical Surgical Procedures Performed During PGY-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 includes one four-month rotation at the Brooklyn VA Medical Center, one four-month rotation at the University Hospital of Brooklyn/Kings County Hospital Center and four months of research. 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 PGY-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, 1o 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 includes one four-month rotation at Maimonides Medical Center, one four-month rotation at the University Hospital of Brooklyn/Kings County Hospital Center, one a four-month clinical rotation at the outpatient office in Brooklyn Heights and the Bay Ridge ambulatory surgery center. 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, sphenoethmoidectomy, 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 PGY-4

- Canaloplasty
- Tympanoplasty II-IV (without Mastoidectomy)
- Modified Radical Mastoidectomy
- Radical Mastoidectomy
- Ossiculoplasty (independent procedure)
- Tympanoplasty with Mastoidectomy
- Simple Mastoidectomy
- Transnasal approach to the sella
- Closure of Pharyngostome
- Transantral Ligation of Vessels
- Oroantral Fistula Repair
- Choanal Atresia Repair
- Uvulopalatopharyngoplasty
- Excision of Simple Tumor of Nose
- Cricopharyngeal Myotomy
- Tissue Expander, placement and management
- Lingual Tonsillectomy
- Pedicle Flap Procedures-Myocutaneous
- 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 – LeFort II
- Rhytidectomy
- Scar Revision
- Frontoethmoidectomy
- External Ethmoidectomy
- Frontal Sinus Trephine
- Endoscopic Sinus Surgery with sphenoidotomy and frontal sinusotomy

The PGY-5 year includes one four-month rotation at NY Methodist Hospital (administrative chief resident), one four-month rotation at the University Hospital of Brooklyn/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

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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.

Further information about the role of the Chief Resident is included in the Chief Resident Manual, which was first prepared by Boris Bentsianov, MD, former Chief Resident, and is updated annually.

Typical Surgical Procedures Performed During PGY-5

- 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:

- Attendance at the Weill Cornell Allergy Resident Education (WeCare) course at the Weill Cornell Medical College
- Combined Allergy-Rhinology Clinic at KCHC
- 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 KCHC 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 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 UHB 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:

- | | |
|------------------------------------|-------------------|
| • University Hospital of Brooklyn: | Richard Rosenfeld |
| • Kings County Hospital Center: | Matthew Hanson |
| • Brooklyn VA Medical Center: | Michael Weiss |
| • Maimonides Medical Center: | Michael Weiss |
| • NY Methodist Hospital: | Joshua Silverman |

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.



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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
- 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-3 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 new temporal bone dissection laboratory that will serve as a state-of-the-art facility for the department's regular basic course in otologic surgery for the residents will be opening up at SUNY-Downstate in the next year.

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.

Block Schedule for PGY1 Year

PGY1	5-months: At least 3 of the following surgical rotations: general, vascular, oncology, thoracic, pediatrics and plastics.	5-months: 1 month in each of the following: vacation, anesthesia, critical care, emergency medicine, and neurosurgery	2-months: otolaryngology
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Block Schedule for PGY2-5 Years

	Block 1 (4 months)	Block 2 (4 months)	Block 3 (4months)
PGY2	NY Methodist	KCHC/UHB	KCHC/UHB
PGY3	Research	Brooklyn VA Medical Center	KCHC/UHB
PGY4	Ambulatory Care*	Maimonides	KCHC/UHB
PGY5	NY Methodist Hospital	Brooklyn VA Medical Center	KCHC/UHB

KCHC, Kings County Hospital Center; UHB, University Hospital of Brooklyn; VA, Veterans Administration

*Includes outpatient office in Brooklyn Heights and Bay Ridge ambulatory surgery center

Didactic Teaching Program**Grand Rounds**

Grand Rounds are held every Thursday morning at the University Hospital of Brooklyn. All house staff, students, research fellows and faculty are required to attend. The first half hour is dedicated to the discussion of various residency related topics. During the 7:00 to 8:00am hour, lectures are delivered by invited guests who are nationally known for their expertise and experience in a variety of topics. In-house speakers and faculty as well as residents present information during the 8:00 to 9:00am hour. Also, journal club occurs from 8:00 to 9:00 on the second Thursday of each month and morbidity & mortality conference occurs at 7:00am on the fourth Thursday. On the fourth Thursday, invited speakers presentations occur from 8:00 to 9:00. Biweekly Head and Neck Tumor Board is included in the schedule from 9:00 to 10:00. Alternating with the Comprehensive Otolaryngologic Curriculum Learning through Interactive Approach (COCLIA) course. Different aspects of basic sciences as related to the field of Otolaryngology-Head & Neck Surgery are presented and discussed from 7:00 to 9:00am during July and August.

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.

Otology Conference - Kings County Hospital Center

The Otology 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. A similar conference takes place bi-weekly at the New York Methodist Hospital.

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



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and Pathology meet 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. 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 audiometry, immittance audiometry, evoked potentials, hearing loss, hearing aids, head and neck disorders, laryngectomy and rehabilitation and dysphagia.

Temporal Bone Dissection Course

During each year of training, residents attend a 3 day temporal bone course. Early course work stress anatomy and embryology, followed by intensive dissections and surgical technique practice. Dr. Matthew Hanson, Dr. Neil Sperling, and Dr. Michal Preis 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 is attended by available members of the residency staff.

Supervision is provided 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. The residents also attend the yearly New York City Pediatric Airway Course.

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. A research template must be completed six months prior to the start of the research rotation for review by the faculty mentor and research faculty.

Designated Research Time

Four months of protected research time is available to all residents during the PGY-3 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-3 year under the PBLI subheading.

Research must be done at the University Hospital of Brooklyn 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.



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Key Indicator Case Numbers For Graduating Chief Residents

SUNY Downstate Otolaryngology Residency Training Program

Residency Review Committee (RRC) Key Indicator Procedure	RRC Minimum	SUNY Downstate PGY5 Mean
Head and Neck		
Parotidectomy	15	18
Neck dissection (all types)	27	36
Glossectomy	10	12
Thyroid/parathyroidectomy	22	80
Otology/Audiology		
Tympanoplasty (all types)	17	45
Mastoidectomy (all types)	15	21
Stapedectomy/ossiculoplasty	10	22
Facial Plastic Reconstructive		
Rhinoplasty (all types)	8	25
Mandible/midface fractures	12	18
Flaps and Grafts	20	36
General/Pediatric		
Airway – pediatric and adult	20	64
Congenital neck masses	7	16
Ethmoidectomy	40	87
Bronchoscopy	22	92
Totals, Key Indicator Cases	245	571
Totals, All Cases	-	1,353

SERVICE CHIEF REPORTS

Division of Pediatric Otolaryngology

Joshua B. Silverman, MD, PhD

The Division of Pediatric Otolaryngology, now in its 23rd year of existence, has continued to achieve excellence in patient care, teaching, and research during the 2014-2015 academic year.

The division has continued its expansion at multiple Brooklyn sites, including SUNY Downstate University Hospital, New York Methodist Hospital, SUNY Downstate Bay Ridge Hospital and Kings County Hospital Center. Faculty from a wide variety of specialties to work together in a multi-disciplinary fashion to create system-based initiatives as well as individual treatment plans for patients. This year has also seen continued success for the multi-disciplinary Brooklyn Cleft and Craniofacial Center, led by Dr. Sydney Butts. The pediatric division has continued to be among the busiest groups at SUNY Bay Ridge Ambulatory Surgery Center as Drs. Rosenfeld, Goldstein, Butts, and Silverman all operate regularly at this surgical center.

Academic pursuits remain strong priorities as the Division continues to forge a national reputation. Richard Rosenfeld, MD, MPH, recently finished a very successful tenure as Editor-in-Chief of the journal Otolaryngology - Head and Neck Surgery and continues as senior advisor for guidelines of quality for the AAO-HNS. Nira Goldstein, MD, MPH, continues to be extremely active in both the American Academy of Otolaryngology, American Society for Pediatric Otolaryngology, and SUNY Downstate Medical School, and is a leading authority on sleep-disordered breathing in children, with many publications on the subject, and multiple current active clinical projects. Joshua Silverman, MD, PhD continues to be active in both the New York State Laryngological Society and the American Laryngological Association. In addition he continues to work closely with multiple basic science peers at SUNY Downstate on translational aspects of laryngeal reinnervation as well as the effects of laryngospasm on respiratory failure in epilepsy, research projects funded by multiple grants, including an NIH grant. Peer-reviewed manuscripts were published in Otolaryngology - Head & Neck Surgery, International Journal of Pediatric Otorhinolaryngology, and Archives of Otolaryngology- Head & Neck Surgery.

Division of Facial Plastic and Reconstructive Surgery

Sydney C. Butts, MD, Chief

The Division of Facial Plastic and Reconstructive Surgery is based at several clinical sites, with services provided at University Hospital Brooklyn, the Brooklyn Heights office site, Kings County Hospital Center and New York Methodist Hospital. 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. A dedicated cosmetic surgery rotation under the supervision of Dr. Richard Westreich allows senior residents to operate with him at Manhattan Eye and Ear Infirmary.

Academic activity from the division included presentations at national meetings, along with publications and chapter submissions to otolaryngology textbooks. Areas of research including the epidemiological factors impacting rates of cleft lip and palate among New York City residents, research in mandibular trauma management, management of facial nerve trauma and the use of microvascular reconstruction patients after multiple courses of radiation.

The otolaryngology service has become actively involved in the management of congenital craniofacial anomalies, becoming the primary referral service for the cleft lip and palate patients born at the neonatal intensive care units at SUNY Downstate and Kings County Hospital. Through collaboration with the NICU, general pediatrics and the pediatric subspecialties, as well as local speech/language pathologists and geneticists, comprehensive and multidisciplinary care is brought to these patients. Formal meetings of the Greater Brooklyn Cleft and Craniofacial Team began in June 2012. This is a multidisciplinary team of clinicians who meet at SUNY Downstate to discuss and coordinate the care of patients referred to the team.

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. Residents participate in formalized didactic activities relating to maxillofacial trauma during this rotation. 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.

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.

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Division of Otology and Neurotology

Matthew B. Hanson, MD

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. We provide 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. 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. Integral to otologic training is the careful dissection of cadaveric temporal bones in the lab. With the closure of the 134 Atlantic office in 2014, the space for our laboratory was lost. Until the new lab can be built at SUNY, we have been generously allowed the usage of the lab belonging to the NYU residency at Bellevue Hospital. This has allowed us to maintain a yearly course schedule for all five years of training of our residents. It is anticipated that a new, state-of-the-art lab will be up and running by 2016.

We also continue to benefit from our close affiliation with the Auditory Oral School of New York. This is an amazing institution that provides for auditory-oral education for children and has become a major resource for our cochlear implant program. Through this school, we are able to provide and coordinate for the speech therapy, auditory/verbal therapy and educational needs of our pediatric implant patients. The full-time audiologists at the school participate in our cochlear implant conferences and are often present for the surgeries to obtain intraoperative neural responses at the time of implantation to facilitate the device programming.

The Otology division continues to benefit from the activity of Dr. Michal Preis, who joined the staff at Maimonides Medical Center in 2013. Dr. Preis completed her Otolaryngology training at Rabin Medical Center in Israel and recently finished a fellowship in Otolaryngology with Dr. Jay Rubenstein in Seattle. Dr. Preis has dramatically expanded the otologic experience of the residents with a large clinical volume at Maimonides and participates in all aspects of resident otologic education, including conferences and temporal bone dissection lab.

The closure of Long Island College Hospital in 2014 had caused some dispersion of the Otologic practice previously centered at that institution. The Neurotologic/Skull base practice has moved to the New York Methodist site, where we continue to work closely with the same Neurosurgeons we had at LICH. The affiliation with NYMH now also allows us to offer stereotactic radiosurgery to our patients with skull base tumors. This was previously not available in our program. The SUNY Downstate Bay Ridge Site has proven to be an outstanding facility for general outpatient otologic cases and has allowed the caseloads of chronic ear surgery, stapedectomy and cochlear implants previously done at LICH to continue unabated.

Division of Head and Neck Surgery and Oncology

Krishnamurthi Sundaram, MD, FACS

Natalya Chernichenko, MD

The Division of Head and Neck, Surgery and Oncology continues to be extremely active and productive, both clinically and academically. Drs. Sundaram, Har-El, Chernichenko, Lin, Butts, Hanson and Lim, continue their role in running the leading center for head and neck cancer management in Brooklyn. Using an interdisciplinary approach, experts from across disciplines come together to provide state-of-the-art care for patients with all types and stages of head and neck cancer. Each month, the Division of Head and Neck Surgery and Oncology runs two busy head and neck tumor boards at SUNY Downstate/Kings County Hospital. We also participate in a monthly head and neck tumor board at New York Methodist Hospital. In the spirit of multidisciplinary approach, management decisions are made in collaboration by head and neck surgeons, radiation oncologists, medical oncologists, radiologists, and pathologists. 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. These dedicated tumor board sessions have been very successful in discussing difficult cases and designing treatment plans. This year marks the beginning of minimally invasive head and neck surgical oncology program. Advances in surgical equipment as well as special training and expertise of our surgeons made it possible to add transoral robotic surgery (TORS), transoral laser surgery (TLS), endoscopic skull base surgery and video-assisted thyroid surgery to our armamentarium.

As a comprehensive head and neck cancer center, we place a special emphasis on quality of life of cancer patients and their families that led to establishment of our survivorship program. Head and neck cancer can impact some of the most basic human functions, including swallowing, speech, sight,

fertility and appearance just to name a few. Our head and neck surgeons as well as our laryngologists, Dr. Bentsianov [division director] and Dr. Silverman, in collaboration with speech and language pathologists, Dr. Luis Riquelme and Ms. Alexandra Soyfer, work with our patients to rehabilitate every aspect of speech and swallowing function following ablative head and neck surgery. Physicians in the Division of Microvascular and Reconstructive Surgery have been working closely with our cancer surgeons on advanced reconstructive procedures for head and neck cancer.

In the Division of Head and Neck Surgery and Oncology we place a special emphasis on basic science and clinical research. Our work investigating the effects of social disparities on patient outcomes led by Dr. Sundaram has been accepted for presentation at IFNOS Head and Neck Meeting. Dr. Chernichenko is leading a basic science project investigating the mechanisms of perineural invasion by head and neck cancers. The results of this work should directly impact the clinical care of cancer patients not only by improving survival and preventing progression of neurotrophic tumors, but also by improving patients' quality of life by diminishing pain and functional impairment. 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. Our Chairman, Dr. Richard Rosenfeld has supported the head and neck division and strongly encouraged its growth. With his help we look forward to further growth and development of the division.

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 the care of voice and swallowing pathology. Office procedures include videostroboscopy, laryngeal EMG and EMG guided injection, endoscopic swallowing 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 laryngeal 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 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 Division of Laryngology, Voice and Swallowing Disorders is also excited to deliver services at our new practice site in Park Slope, Brooklyn. This effort is primarily spearheaded by Dr. Joshua Silverman MD PHD who has unique training in both adult and pediatric laryngology care, and who will serve as site director. This location and our new ambulatory surgical site in Bay Ridge, Brooklyn has further expanded our surgical capabilities and our relationships throughout the borough.

The division is further enhanced by its affiliation with the Brooklyn VA Hospital where we have a full operating room session and clinic hours specifically dedicated to the needs of laryngologic patients. This clinic is 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. The program has also allowed us to build our relationship with the Parkinsons program at SUNY Downstate and deliver the highest level of LSVT trained therapy to this challenging population. This aspect of our Division also has facilitated the care of post laryngectomy patients by providing this patient group 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 laser technology allowing us to expand our endoscopic options. This improved precision and reliability allows us to perform less invasive procedures with shorter recovery times and improved results.

Contributing to education of medical students at SUNY Downstate medical center continues to be a core mission within the Division of Laryngology.

We are active in the basic science years with supervision in the anatomy labs and preparation for clinical medicine curriculum. As students progress through their clinical years they can participate in

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our office hours and surgical block-time in either a 2 week surgical rotation or more advanced 4 week sub-internship designed to prepare students for a possible career in otolaryngology.

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.

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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, hearing aid and cochlear implant evaluation and mapping, auditory brainstem response testing, electronystagmography, and evaluation of central auditory processing skills.

Our universal newborn hearing screening program evaluates auditory function in all newborns born within our facilities. The goal of the program is to identify babies at risk for hearing loss and provide them with further evaluation. For those with permanent hearing loss, amplification evaluations will be recommended. Treatment before six months of age, will reduce 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 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

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 and training audiology students.

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RESEARCH REPORT

In the year 2014-2015, Drs. Kollmar, Sundaram, Silverman, Stewart, Harris, Thakkar and Alessi continued their work supported by an AAOHNSF Percy Memorial Research Grant studying the restoration of recurrent laryngeal nerve function after injury in a rat model. The team was successful in obtaining an R21 sponsored by the NIDCD to continue their studies. The team has also collaborated with Dr. Stewart and Dr. Arjomandi to study post-obstructive pulmonary edema as a cause of sudden death in seizures, also in the rat model. Drs. Chernichenko and Kollmar are studying perineural invasion in a zebrafish model and Dr. Kollmar is continuing his work studying the molecular genetics of otolith formation in the zebrafish. Drs. Butts and Gitman were awarded the SUNY Downstate President's Health Disparities Grant studying epidemiological factors associated with orofacial clefting in New York City. Dr. Rosenfeld completed his term as the Editor-in-Chief of the journal Otolaryngology Head and Neck Surgery and chaired the AAO-HNS Guidelines Development Task Force that sponsored panels to develop clinical practice guidelines on adult sinusitis and otitis media with effusion, a clinical consensus statement on nasal septoplasty and a clinical consensus statement development manual. Drs. Butts and Floyd presented *A Systematic Review of Peri-operative Pain Management in Patients with Mandibular Fractures* at AAFPRS and Drs. Silverman, Lewis, Earley, Arjomandi and Rosenfeld presented *Systematic Review of Treatment of Adult Laryngotracheal Stenosis* at the Triological Combined Section Meetings and Dr. Lewis was the recipient of the John J. Conley, MD Resident Research Award. Drs. Arjomandi and Floyd presented their research at the 10th Metropolitan NY Resident Research Day Symposium. Notable publications include Dr. Goldstein's, Dr. Fishkin's and Dr. Abramowitz' *The Prevalence of Sleep-Disordered Breathing in Children with Asthma and its Behavioral Effects* published in Pediatric Pulmonology and Dr. Rosenfeld's Clinical Practice Guideline (Update): Adult Sinusitis published in Otolaryngology-Head and Neck Surgery.

Dennis Lee, MD, a graduate of our residency program, has made a generous contribution to fund the SUNY Downstate Department of Otolaryngology Dr. Frank E. Lucente Resident Research Grant. This \$5000 resident research grant will be awarded annually starting in 2015.

Ongoing Research Projects

Richard M. Rosenfeld, MD, MPH

1. AAO-HNS clinical practice guideline on adult sinusitis
2. AAO-HNS clinical practice guideline on otitis media with effusion
3. AAO-HNS clinical consensus statement on nasal septoplasty
4. AAO-HNS clinical consensus statement development manual
5. Multiple ongoing projects assisting otolaryngology residents with research design, systematic review, and data analysis

Krishnamurthi Sundaram, MD

1. RLN reinnervation in a rat model.
2. Marital status and survival in head and neck cancer in Brooklyn.
3. Review of flaps in salvage nasopharyngectomy.
4. SUDEP: study of RLN function in sudden death during epileptic seizures.

Nira Goldstein, MD, MPH

1. Developmental delay in young children with sleep-disordered breathing before and after tonsil and adenoid surgery
2. Angioedema – Prospective Study
3. The impact of adenotonsillectomy on pediatric asthma
4. Multi-Institutional Validation of the Clinical Assessment Score-15 (CAS-15) for Pediatric Sleep-Disordered Breathing

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Sydney Butts, MD

1. Epidemiological factors associated with orofacial clefting in New York City. Principal Investigator- Sydney C. Butts, MD. Collaborators-Simone Reynolds MPH PhD, Michael Joseph MPH PhD.

Natalya Chernichenko, MD

A novel xenograft zebrafish model of perineural invasion

Richard Kollmar, PhD

1. Molecular genetics of otolith formation in the zebrafish
2. Restoration of recurrent-laryngeal-nerve function after injury in a rat model
3. Laryngospasm during seizures.
4. A Novel Zebrafish Xenograft Model to Study Perineural Invasion of Cancer.

Joshua Silverman, MD, PhD

1. Restoration of recurrent- laryngeal-nerve function after injury in a rat model
2. Angioedema – Prospective Study

Abraham Shulman, MD

1. Noise induced tinnitus animal model drug efficacy – ALA.
2. TBI animal model drug efficacy ALA.
3. Functional brain Imaging QEEG/LORETA and Tinnitus

Krishnamurthi Sundaram, MD

1. Restoration of recurrent-laryngeal-nerve function after injury in a rat model
2. RLN reinnervation in a rat model.
3. Preservation of RLN in thyroidectomy for anaplastic thyroid cancer
4. Review of sinus disease in Brain abscesses
5. SUDEP: study of RLN function in sudden death during epileptic seizures

Resident Research Projects:**Hamid Arjomandi, MD**

1. The impact of adenotonsillectomy on pediatric asthma
2. A Rat Model of Postobstructive Pulmonary Edema
3. Systematic review of treatment of adult laryngotracheal stenosis

Elizabeth Floyd, MD

1. Angioedema – Prospective Study

Lyuba Gitman, MD

1. Epidemiological factors associated with the prevalence of orofacial clefts in New York City

Scott Harris, MD

1. Restoration of recurrent- laryngeal-nerve function after injury in a rat model

Punam Thakkar, MD

1. Restoration of recurrent-laryngeal-nerve function after injury in a rat model

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SUNY Downstate Department of Otolaryngology**DR. FRANK E. LUCENTE RESIDENT RESEARCH GRANT**

Description: Up to \$5000, non-renewable, awarded yearly to one or more SUNY Downstate Otolaryngology residents for an original resident research project on any topic related to the field of Otolaryngology. Applications will be reviewed by the Otolaryngology faculty. Research findings are expected to be presented at the annual Frank E. Lucente, MD, Resident Research Day as well as a national meeting and published in an appropriate journal. The recipient will be acknowledged at Research Day, the Graduation Dinner, and in the Departmental Annual Report.

Application Instructions: This research must be conducted under the supervision of a faculty mentor. If applicable, Institutional Review Board (IRB) Approval or Institutional Animal Care and Use Committee (IACUC) approval must be obtained before funds are released.

The application must include:

1. Application Form
2. Abstract (2,000 characters max. including spaces)
3. Specific Aims (no more than three; maximum 1 page),
4. Research Strategy divided into the following sections: Significance, Innovation, & Approach. See attached CORE grant instructions for guidance. Maximum of 6 pages
5. References
6. Budget with Justification (maximum 1 page)
7. Letter of Support from faculty mentor
8. IRB or IACUC approval letter, if applicable, or note of pending status.

Key dates:

- November 1: due date for applications
- December 31: notification of decision
- January 15: funds available

SUNY Downstate Department of Otolaryngology Dr. Frank E. Lucente Resident Research Grant
Application

Name of Applicant: _____ Position: _____

Cell Phone: _____ E-mail: _____

Faculty Mentor: _____ E-mail: _____

Title of Project: _____

Additional Investigators: _____

If applicable:

IRB Protocol #: _____ Approval dates: _____

IACUC Protocol #: _____ Approval dates: _____

SUNY Downstate Hospital, Maimonides Medical Center, NY Methodist Hospital, Brooklyn VA Medical Center

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