

DEPARTMENT OF

OTO LARYNGOLOGY

ANNUAL REPORT 2016

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

Manhattan Eye, Ear & Throat Hospital

Design & Photography
Department of Biomedical Communication
SUNY Downstate Medical Center

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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 2015-2016 academic year marked the 25th 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), New York Methodist Hospital (NY Methodist), and Manhattan Eye, Ear, and Throat Hospital (MEETH).

This past year was marked by consolidation and continued growth. Our residency program has no current citations and all prior citations have been remedied and removed. We continue to pursue a diverse palate of basic, clinical, and translational research supported by national, state, and institutional grants. Our clinical and audiological services are more robust and bountiful than ever and the faculty providing them continue to grow professionally with academic awards and promotions. Please read on for a full description of other noteworthy accomplishments.

Talent and Commitment

A 25th wedding anniversary is a major milestone and so, by analogy, is the silver anniversary of the Department of Otolaryngology at SUNY Downstate Medical Center and affiliated hospitals. We are not a traditional marriage, per se, but our faculty, residents, and staff share an interdependence that at times makes it feel like a nuptial bond exists. What makes this bond, and our department, so special is the extraordinary talent and commitment of all participants.

Our 14 full-time faculty at SUNY Downstate, plus many other full- and part-time affiliated faculty, are truly the best and brightest of the bunch. Year after year they receive accolades from our residents on annual evaluations for their commitment to teaching, clinical care, and resident education. They encompass the full panoply of fellowship training within otolaryngology and are recognized leaders locally, regionally, nationally, and even internationally. As chairman and program director I am truly blessed that these hyper-talented individuals have chosen to practice their craft in Brooklyn and commit to residency training and education.

Talent is broadly defined as “a special ability that allows someone to do something well,” but in the case of Brooklyn I would add one qualifier: extraordinarily well. And this ability is not just inherent in our faculty, but also in our audiologists, who continue to expand clinical services, provide community outreach, and train audiology residents at multiple teaching sites. Although not part of our department, per se, we also continue to shine, by proxy, from our close relationship with the Auditory Oral School of New York, which is arguable the most talented, innovative, and successful school of its kind in the world.

One aspect of talent that is easily overlooked is within our administrative and support staff, who often function behind the scenes and out of the limelight. They are, however, the glue that binds together all of what we do as a clinical and academic enterprise. Our senior administrators and managers continue to take on new responsibility as practice locations blossom and affiliate relations mature and thrive. The closure of Long Island College Hospital in May 2014 was a huge shock to our system, necessitating new affiliations and multiple new faculty practice sites. Nonetheless, our talented administrative and support staff rose to the challenge, acquired new skills, and continue to improve our practice environment and patient services.

I alluded briefly earlier to our growing research enterprise, which would not be possible without the incredible talents of Richard Kollmar, in the Department of Cell Biology, and Mark Stewart, Dean of the School of Graduate Studies, who have partnered with our faculty in a win-win relationship to pursue innovative, ground-breaking translational research. Our other faculty also pursue many diverse clinical research projects, but the continued growth of basic and translational work is particularly noteworthy.

Last, a brief mention about “commitment,” which is “the attitude of someone who works very hard to do or support something.” Talent without purpose is not very useful, but when talented faculty, administrators, staff, and researchers all channel their efforts to support our department and residency training a wonderful outcome ensues. Like our faculty, our residents are truly the best of the best, and are a joy to work with and train. They are often the face of our department, a face we are proud to share with all of the diverse stakeholders we serve.

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 to serve the community with quality care that most affects the daily lives of the patients and families. With this in mind, I will briefly summarize the current state of our varied clinical programs.

Facial plastic and reconstructive surgery has shown continued growth and expansion through the leadership of Sydney Butts, 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, 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, and minimally invasive surgery. Endocrine surgery remains a center of excellence. We look forward to additional growth, especially in transoral robotic surgery, when Stefan Mlot joins the department in September 2016.

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 tinnitologists 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 neurolaryngology 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, and office balloon sinuplasty. 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 residents. 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

Natalya Chernichenko organized the annual Frank E. Lucente Alumni and Resident Research Day program, which featured keynote speaker Clarence Sasaki, from the Yale School of Medicine, and alumni speaker Bhuvanesh Singh, from Memorial Sloan-Kettering Cancer Center. In addition to showcasing our resident and faculty research, our invited presentations included innovative approaches to treating head and neck cancer, and a new alumni panel discussion, coordinated by Boris Bentsianov, on professional success and work-life balance. Please review the full agenda later in this report for additional details and abstracts.

Nira Goldstein continues as Director of Research and remains 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, the State of New York, SUNY Downstate Medical Center, and the American Academy of Otolaryngology – Head and Neck Surgery Foundation.

Nicole Fraser, our educational coordinator, remains an invaluable resource working with Richard Rosenfeld, program director, and Nira Goldstein, associate program director, to maintain a citation-free department that fully implements the ACGME Next Accreditation System, including milestone

assessments, a clinical competency committee, and a program evaluation committee. Sydney Butts continues to oversee 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 innovations in the management of salivary gland neoplasms. Keynote speakers were Richard Wong and Nancy Lee, both from Memorial Sloan-Kettering Cancer Center. 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 desired employment by all graduates. We view our residency program as the centerpiece of our 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

- Boris Bentsianov was appointed to the AAO-HNS Airway and Swallowing Committee and the AAO-HNS Practice Management Committee
- Sydney Butts was promoted to Associate Professor with Tenure
- Sydney Butts was the Distinguished Faculty Honoree for Student National Medical Association at SUNY Downstate Medical Center
- Sydney Butts was an invited International Faculty Instructor for AO CMF, Kolkata, India
- Natalya Chernichenko was awarded an Empire Clinical Research Investigator Program grant from the State of New York
- Natalya Chernichenko was inducted as a Fellow of the American College of Surgeons
- Sean Ciecko was the voluntary faculty honoree at our Resident Graduation Dinner
- Nira Goldstein was elected Director at Large for ASPO
- Nira Goldstein was awarded 3rd place poster at the ASPO Annual Meeting
- Eli Gordin was the full-time faculty honoree at our Resident Graduation Dinner
- Eli Gordin received the KCHC Annual Doctor's Day Award
- Matthew Hanson was nominated for a Distinguished Teaching Award at Downstate
- Richard Kollmar received the SUNY Award for Excellence in Medicine from the SUNY Downstate School of Graduate Studies
- Frank Lucente received the Patrick E. Brookhouser Award of Excellence from the Triological Society
- Stefan Mlot was recruited as Chief of Robotic and Microvascular Surgery
- Courtney Morgan joined the department as a full-time audiologist
- Richard Rosenfeld was appointed Distinguished Professor of Otolaryngology, the highest academic rank in the SUNY system
- Richard Rosenfeld presented the Ogura Lectureship at Washington University in St. Louis, Missouri
- Sal Saleh expanded our audiology residency program in Park Slope and Brooklyn Heights
- Joshua Silverman was inducted into the American Society of Pediatric Otolaryngology
- Krishnamurthi Sundaram received an honor award from AAO-HNS for volunteer service
- Krishnamurthi Sundaram was inducted into the NY Methodist Hospital's Healer's Hall of Fame for outstanding kindness, compassion, and competence in healthcare

Notable Resident, Study, and Other Accomplishments

- Jason Abramowitz, Sean Lewis, and Derek Wu represented our department at the AAO-HNS annual leadership and advocacy conference
- Hamid Arjomandi was awarded the Sundaram Prize for Head and Neck Research
- Daniel Ballard became a resident member of the AAO-HNS Media and Public Relations Committee and the AAO-HNS Allergy, Asthma, and Immunology Committee
- Sujana Chandrasekhar initiated a new otology rotation at MEETH for resident training
- George Ferzli was honored in the NY Methodist Hospital's 2016 Healer's Hall of Fame
- George Ferzli represented our department at the 8th Annual NYC Pediatric Airway Symposium
- Lyuba Gitman matched for a fellowship in pediatric otolaryngology at Children's National Medical Center in Washington, DC
- Sandra Ho was awarded a departmental research grant
- Lee Kaplowitz was awarded a departmental research grant
- Emily Savoca was awarded Outstanding Medical Student Performance in Otolaryngology

- Elizabeth Floyd was awarded 3rd Place at the Metropolitan NY Resident Research Day
- David Satriano was the staff honoree at our Resident Graduation Dinner
- Daniel Sukato became a resident member of the AAO-HNS Implantable Hearing Aids Committee
- Derek Wu became a resident member of the AAO-HNS Airway and Swallowing Committee and the Pediatric Otolaryngology Committee

A Bright Future

We are delighted to welcome our three new PGY-1 residents, Rachel Irizarry, from SUNY Downstate Medical School, Prayag Patel, also from SUNY Downstate Medical School, and Alisa Timashpolsky, from SUNY Stonybrook Medical School.

We are proud of our three departing chief residents and wish them health, happiness, and success. Sean Lewis begins a fellowship in laryngology at Mount Sinai Medical Center, Punam Thakkar begins a fellowship in head and neck oncology at the University of Pennsylvania, and Jason Wasserman joins ENT and Allergy Associates at their Bayside office in Queens, NY.

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 Veronica Ortiz 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

TRIBUTES TO DR. LUCENTE

Dr. Chris de Souza, Editor-in-Chief of the International Journal of Head and Neck Surgery, dedicated the 2016 January-March Issue 1 to recognize and acknowledge Dr. Frank Lucente's worldwide contributions to the discipline of Otolaryngology. In the Dedication page, Dr. Nira Goldstein and Dr. Krishnamurthi Sundaram, Guest Editors and long-time colleagues of Dr. Lucente, wrote, "for his immense contributions to the field of Otolaryngology – Head and Neck Surgery and medical education

Dedication

We dedicate this issue of the International Journal of Head and Neck Surgery to Dr Frank E Lucente for his immense contributions to the field of Otolaryngology – Head and Neck Surgery and medical education. Each article is authored by at least one of Dr. Lucente's current or former trainees. The guest editors, Dr Nira A Goldstein and Dr Krishnamurthi Sundaram, are long-time colleagues of Dr Lucente in the Department of Otolaryngology at the State University of New York Downstate Medical Center.

Nira A. Goldstein, MD
Krishnamurthi Sundaram, MD
Guest Editors

International Journal of Head and Neck Surgery
2016| January-March | Issue 1



Tributes

I have known Frank Lucente since his arrival at the Mount Sinai Medical Center in the 1970s. Frank was a scholar, educator and master administrator who had a vision for medical education at all levels and was able to create learning environments at the New York Eye and Ear Infirmary and Downstate Medical Center where he is currently Chairman Emeritus and Associate Dean for Education. He also has graced the National Stage with major contributions to most of our academic societies. It is truly a pleasure to work with Frank and educational projects and to be able to contribute to a volume in his honor.

Andrew Blitzer MD, DDS
Professor Emeritus, Department of Otolaryngology/Head and Neck Surgery
Columbia University College of Physicians and Surgeons
New York, New York, USA

It is a pleasure to contribute to this issue honoring our mentor, teacher and friend Dr. Frank Lucente. We are grateful recipients of his leadership as our chairman during the impressionable residency training years. And he has remained a beacon of knowledge, wisdom and inspiration to us. Dr. Lucente taught us to not overlook the everyday, the mundane, the taken-for-granted aspects of medical care. It is precisely in the everyday activities that opportunity exists for learning and advancement. It is with this spirit that we chose to explore cerumen hygiene where we feel there is a significant opportunity to challenge the status quo, for advancement in our medical specialty and to the betterment of our patients. We are grateful to Dr. Lucente for his tutelage and inspiration.

Neil M Sperling MD
Affiliate Associate Professor of Clinical Otolaryngology
Weill Cornell Medical College
Adjunct Associate Professor, Department of Otolaryngology
State University of New York Downstate College of Medicine
New York, New York, USA

William M Portnoy MD, FACS
Director, Chelsea Otolaryngology, PLLC
Diplomate, American Board of Facial Plastic and Reconstructive Surgery
Diplomate, American Board of Otolaryngology-Head and Neck Surgery
New York, New York, USA

Dr. Frank E. Lucente is the brightest, kindest, and most dedicated otolaryngologist in the world. His entire life's work revolves around healing patients, educating students and residents and contributing to the advancement of our beloved specialty. Matching at SUNY Downstate for otolaryngology residency in 1992 was a blessing, and Dr. Lucente was a superb chairman, teacher, surgeon, and role-model. I am eternally grateful for the profound and positive influence Dr. Lucente has made on my life.

Eric M Joseph MD
Diplomate American Board of Facial, Plastic and
Reconstructive Surgery
Diplomate American Board of Otolaryngology
West Orange, New Jersey, USA



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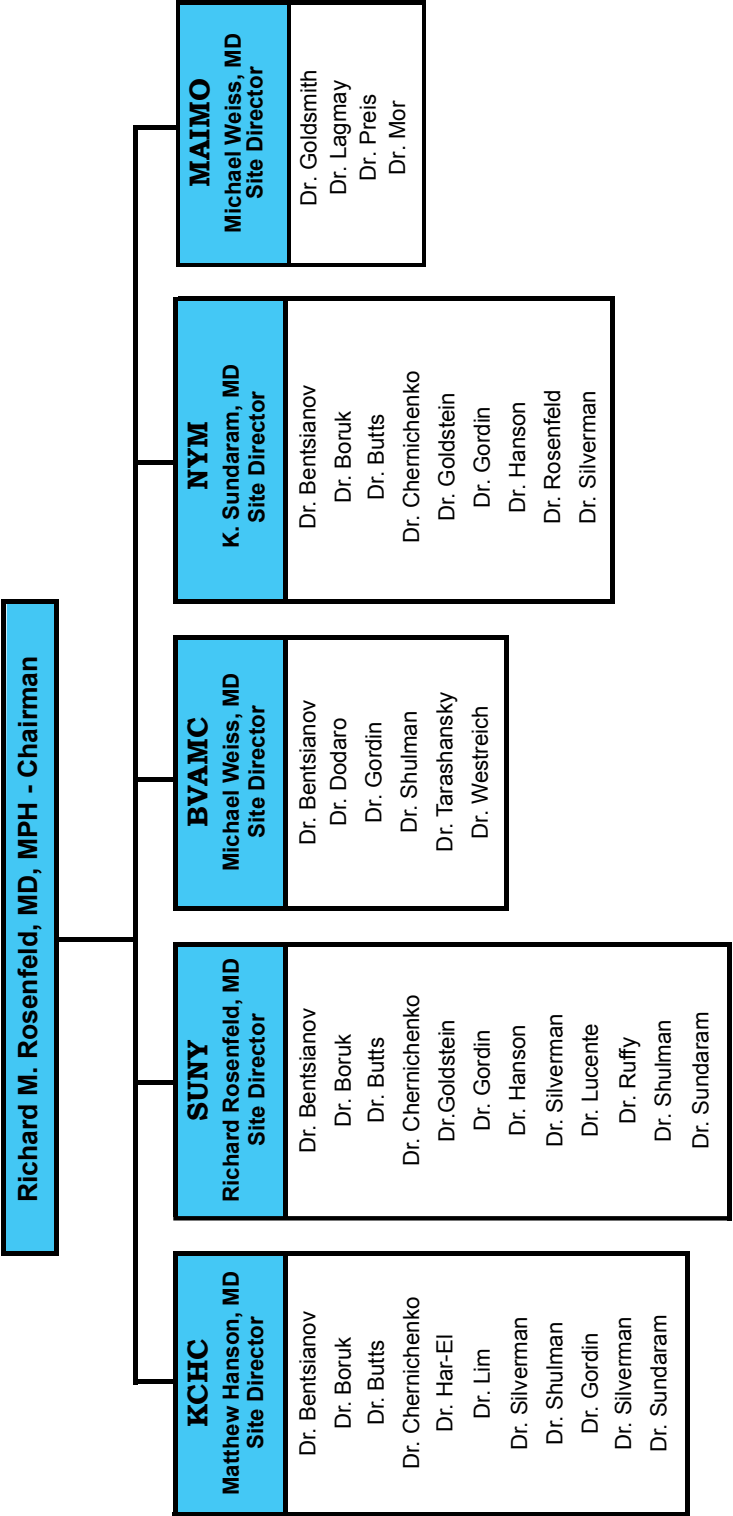
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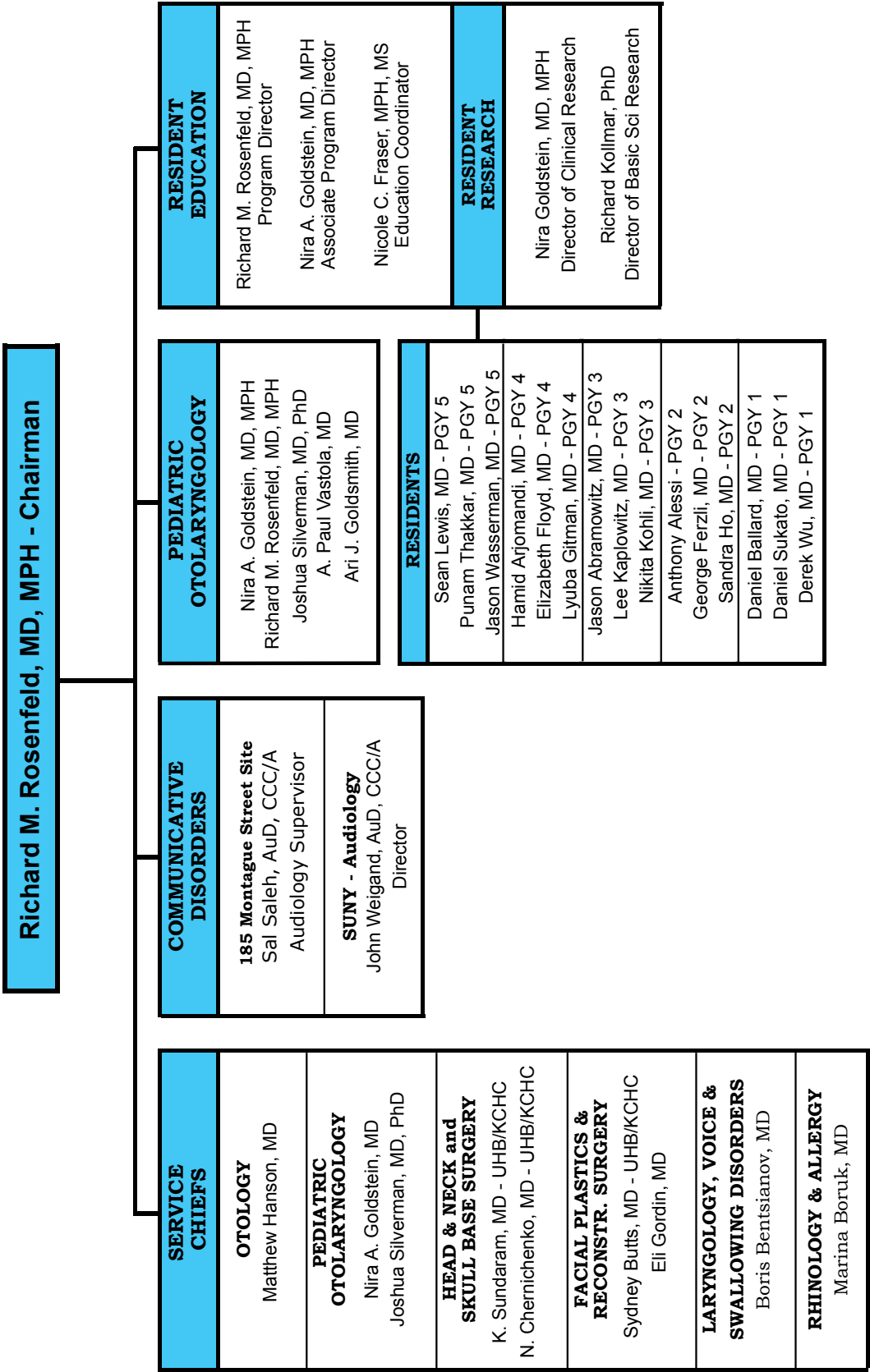
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Department of Otolaryngology
TABLE OF ATTENDING STAFF FOR EDUCATIONAL PROGRAMS



DIVISIONS. RESIDENT EDUCATION, AND RESEARCH



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.



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. Dr Bentsianov is active at the national level as a member of the Academy of Otolaryngology committee on airway and swallowing disorders and the practice management education committee.



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 Vice Chair and 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.



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 25 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.

**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/Otology 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.

**Stefan Mlot, MD**

Dr. Mlot is an Assistant Professor of Otolaryngology/Head and Neck Surgery and Chief of Robotic and Microvascular and Surgery at SUNY Downstate Medical Center. He attended the University of North Carolina for his undergraduate and medical education. He went on to complete his otolaryngology residency in Manhattan at New York-Presbyterian Hospital/Columbia and Cornell, which included extensive training in head and neck cancer surgery at Memorial Sloan-Kettering Cancer Center. Dr. Mlot then completed a fellowship in both ablative and reconstructive head and neck cancer surgery at the University of Miami, where he was awarded the James R. Chandler Fellow Research Award for his work in socioeconomic disparities in the treatment of head and neck cancer. Dr. Mlot's clinical and research interests lie primarily in the treatment of benign and malignant tumors of the head and neck, with a particular interest in utilizing microvascular free tissue transfer, transoral robotic surgery, and transoral laser surgery in the care of these complex pathologies. Of particular interest to him is providing high-quality, evidence-based, and cost-effective care to the population of Brooklyn in a manner that emphasizes quality of life and survivorship.

**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.

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.



Niv Mor, MD

Dr. Mor is Assistant Clinical Professor of Otolaryngology at Downstate Medical Center and has recently joined as a faculty member in the Department of Surgery at Maimonides Medical Center. Dr. Mor obtained a Bachelor of Arts in Mathematics from Brandies University and an Doctorate of Medicine from The University at Buffalo, The State University of New York School of Medicine and Biomedical Sciences. He received his training in Otolaryngology- Head and Neck Surgery at The State University of New York Downstate Medical Center and completed a fellowship in Laryngology and Neurolaryngology at Mount Sinai Roosevelt Hospital and Weill Cornell Medical Center.



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.



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 President-Elect of the American Laryngological Association. Dr. Har-El is also the Vice-President-Elect of the Triological

Society. Also, he is a fourth 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 9 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.



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, the Rhinoplasty Society 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 (Multimedia, Emerging Trends and Technology, and Fellowship Compendium) and the past 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 graduate 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

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."

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. His clinical experience has made him a major contributor to our training program.



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". Dr. Sinnreich practices in Staten Island. Although he is a general Otolaryngologist seeing children and adults, his special interests are in the treatment of sleep and sinus disorders.

Neil M. Sperling, MD

Dr. Sperling is Adjunct Associate Professor and previous director of the Division of Otology in the Department of Otolaryngology. He is also Affiliate Assistant Professor of Clinical Otolaryngology at Weill Cornell Medical College.

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.

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

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-
AAO-HNS Sr. Advisor for Performance Measures, 2016-
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

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 Academy of Facial Plastic and Reconstructive Surgery, 2001
- Face to Face Committee

Specialty Surgery Committee (Chair of the Cleft and Craniofacial Subcommittee)
- Women in Facial Plastic Surgery Committee
AO/Association for the Study of Internal Fixation, 2008 –present
- Craniomaxillofacial Faculty
Fellow, American College of Surgeons, October 2012
New York Facial Plastic Surgery Society, 2012 -present
Member, Society of University Otolaryngologists - Diversity Task Force Committee

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)
Fellow of the American College of Surgeons, 2016

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
AAO-HNS Implanted Hearing Devices Committee, term ended 2016
AAO-HNS Equilibrium Committee
AAO-HNS Hearing Committee
AAO-HNS Otology and Neurotology Education 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-
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

American Academy of Otolaryngology – Head and Surgery
New York Head and Neck Society
American College of Surgeons - Fellow

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
Rhinoplasty 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)

Daniel Sukato, MD

AAO-HNS Implantable hearing device Committee

VISITING LECTURER

Richard M. Rosenfeld, MD, MPH

From evidence to action: Why guidelines matter. Ogura Lectureship, Dept. Otolaryngology, Washington University, St. Louis, MI, June 2016.
Summing up: Systematic reviews and the Cochrane Collaboration. Ogura Lectureship, Dept. Otolaryngology, Washington University, St. Louis, MI, June 2016.
New AAO-HNS guidelines for managing otitis media with effusion. Otolaryngology Section Annual Clinic Day, Long Island Marriott, Uniondale, NY, December 2015.
Updated guidelines for otitis media with effusion. Pediatric Grand Rounds, NY Methodist Hospital, Brooklyn, NY, November 2015.
Evidence-based otitis media. Pediatric Resident Conference, SUNY Downstate Medical Center, Brooklyn, NY, November 2015.
Current guidelines for tonsillectomy and adenoidectomy in children. Brazilian Academy of Pediatric Otorhinolaryngology, Fortaleza, Brazil, November 2015.
Chronic rhinosinusitis in children: roundtable. Brazilian Academy of Pediatric Otorhinolaryngology, Fortaleza, Brazil, November 2015.
Evidence-based medicine vs. common-sense based medicine. 45th Brazilian Congress on Otorhinolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, November 2015.
Current management of otitis media with effusion. 45th Brazilian Congress on Otorhinolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, November 2015.
Current indications for tympanostomy and ventilation tube insertion. 45th Brazilian Congress on Otorhinolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, November 2015.
New US guidelines for acute otitis externa and tympanostomy tube otorrhea. 45th Brazilian Congress on Otorhinolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, November 2015.
Otitis media roundtable: current treatment of acute otitis media and otitis media with effusion. 45th Brazilian Congress on Otorhinolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, November 2015.
Evidence-based common sense. Pediatric & Surgery Grand Rounds, Nemours Children’s Hospital, Orlando, FL, October 2015.
Evidence-based commons sense. 9th IAPO International Symposium on Pediatric ENT, São Paolo, Brazil, September 2015.
Current management of acute otitis media. 9th IAPO International Symposium on Pediatric ENT, São Paolo, Brazil, September 2015.
Current management of otitis media with effusion. 9th IAPO International Symposium on Pediatric ENT, São Paolo, Brazil, September 2015.
Key recommendations from the US guidelines on AOE, AOM, and tympanostomy tubes. 9th IAPO International Symposium on Pediatric ENT, São Paolo, Brazil, September 2015.

Sydney Butts, MD

Optimizing Outcomes in Patients with Cleft Lip and Palate. Department of Otolaryngology Grand Rounds, Long Island Jewish Medical Center, June 2016

Fractures of the Zygoma, Naso-Orbital-Ethmoid Fractures. AO Principles of Craniomaxillofacial Trauma, Ottawa Canada, June 2016

Cleft and Velopharyngeal Dysfunction Interactive Conference. Participated in “Management of Challenging Oronasal Fistulas Panel”; co-moderated small group discussion sessions and coordinated presentation of surgical videos showing techniques of cleft lip and palate repair. Medical University of South Carolina, Charleston SC, December 2015

Nursing Care of Patients with Cleft Lip and Palate. Beth Israel School of Nursing, New York, NY. November 2015

Invited International Faculty Instructor-AO CMF (Asia). Principles of Operative Treatment of Craniomaxillofacial Trauma and Reconstruction. Frontal Sinus and Skull Base Fractures, Fracture Treatment in the Growing Skeleton, Treatment of Condylar Fractures, Treatment of Fractures of the Mandibular Body and Angle. Kolkota India, July 2015

Natalya Chernichenko, MD

Challenging cases: Thyroid and parathyroid diseases. Endocrine Grand Rounds, SUNY Downstate Medical Center, April 2016

The Xenotransplantation in Zebrafish to Study Perineural Migration of Human Cancers. MSKCC Head and Neck Symposium, June 2016

Matthew Hanson, MD

“Deafness in America”. Rutgers University-New Jersey Medical School, Department of Otolaryngology Grand Rounds, January 2016

Abraham Shulman, MD

Video presentation: EEG Based brain function Imaging and Tinnitus. Neuroequilibrimetric Society(NES,) Budapest , Hungary, May 2016

EEG Based brain function Imaging and Tinnitus - Clinical Implications. Department of Otolaryngology, University of Miami, April 2016

Joshua Silverman, MD

Pathophysiology and Management of Pediatric Laryngotracheal Stenosis, Pediatric Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2016

Management of Pediatric Otolaryngologic Emergencies, Emergency Medicine Grand Rounds, New York Methodist Hospital, Brooklyn, NY, February 2016

Michael Weiss, MD

Current Topics in Thyroidology. Maimonides Medical Center, Department of Surgery, June 2016

AWARDS, HONORS, & SPECIAL ACHIEVEMENTS

Richard M. Rosenfeld, MD, MPH

Ogura Lectureship, Washington University, St. Louis, MI, 2016
Distinguished Professor appointment, SUNY Downstate Medical Center
Pediatric & Surgery Keynote Speaker, Nemours Children’s Hospital, Orlando, FL
Presidential Guest Speaker, 45th Brazilian Congress on Otolaryngology and Cervicofacial Surgery, Fortaleza, Brazil, 2015
Senior Advisor for Guidelines and Quality, AAO-HNS
America’s Top Doctors, Castle-Connolly Medical Ltd
Top Doctors in America, Consumer Research Council
Best Doctors in America, Best Doctors Inc.
Media Spokesperson for AAO-HNS
Print and electronic media: MedPage Today, The New York Times, Medscape, WebMD, Reuters, Parent’s Magazine

Sydney Butts, MD

Distinguished Faculty Honoree-Student National Medical Association-SUNY Downstate Medical Center, May 2016
2016 New York Super Doctors®- Selected among the top otolaryngologists in New York City, to be listed in the New York Times, May 2016

Nira Goldstein, MD, MPH

ASPO Annual Meeting 2016- 3rd Place Poster Award
Elected to serve as ASPO Director at Large 2016-2019
Guest Editor, International Journal of Head and Neck Surgery

Eli Gordin, MD

KCHC Doctors Day Award
2016 SUNY Department of Otolaryngology Resident Teaching Award

Matthew Hanson, MD

Again named to Castle Connolly Top Doctors in New York (9th year) and listed again in New York Magazines Top Doctors issue (2nd time).

Again named a “Super Doctor” by Key Media and listed in New York Time magazine list of Super Doctors (7 straight years)

Again named a “Top Physician” by Consumer Council of America
Nominated for SUNY-Downstate Excellence in Teaching Award

Frank Lucente, MD

Patrick E. Brookhouser MD Award for Excellence from The Triological Society for service to the organization and profession, May 2016

Award of Appreciation from the International Journal of Head and Neck Surgery, presented by Chris DeSouza, March 2016

Elected, Foundation Board of Hudson Valley Hospital of Columbia-Presbyterian Medical System
Elected, Advisory Board of the Community Foundation of the Hudson Valley/Putnam County

Elected, Board of the Putnam Historical Society

Abraham Shulman, MD

Marquis Who’s who in America 2015 2016
NYAS Listing Collector’s Edition Directory 2016
America’s Best Physicians 2015, 2016
America’s Top Physicians 2015
Editorial Board Invitation: Annals Clinical Otolaryngology, 2016
Top Doctor by Castle Connolly, 5yrs

Joshua Silverman, MD, PhD

Inducted into ASPO
NIH National Institute on Deafness and Other Communication Disorders
Exploratory/Development Grant (Number: 1R21DC013629-01A1), co-PI.
Project Title: Restoration of Recurrent-Laryngeal-Nerve Function after Injury in a Rat Model
Frank E. Lucente Resident Research Grant, Mentor. Nationwide characteristics and outcomes of patients undergoing laryngeal cleft repair from 1997 to 2012 using KIDS Databases
Frank E. Lucente Resident Research Grant, Mentor. Novel Method for Implanting Tracheostomy Tube in Mice

Krishnamurthi Sundaram, MD

Listing in NY Times in NY ENT Super Doctors, 2008-2016
Best doctors in America listing by Consumer Research Council, 2009-2015
Appointed to the Editorial Board, Otolaryngology Open Journal, Openventio Publishers, 2015
Honors Award from AAOHNS at annual meeting, Dallas, Tx, 2015
Listing in Marquis Who's Who in America, 2012 - 2015

Elizabeth Floyd, MD

Third place at the 11th Annual Metropolitan New York Resident Research Day Symposium

Sandra Ho, MD

Recipient of the Frank E. Lucente Resident Research Grant

Sean Lewis, MD

American Academy of Otolaryngology- HNS Board of Governors
-BOG Committee on Governance and Society Engagement Member
American Academy of Otolaryngology- HNS Section for Residents and Fellows in Training
-Board of Governor
American Academy of Otolaryngology- HNS Delegate to Associates and Residents Society of the American College of Surgeons
-Delegate
Resident Leadership Grant, Board of Governors, American Academy of Otolaryngology-Head and Neck Surgery. March 2016
Resident Travel Grant, Triologic Society Combined Sections Meeting. January 2016
Resident Leadership Grant, Board of Governors, American Academy of Otolaryngology-Head and Neck Surgery. September 2015

DEPARTMENT EVENTS ANNUAL HOLIDAY PARTY



1 (L to R): Resident Wasserman, Resident Thakkar, Resident Lewis and Richard Rosenfeld, MD, MPH, Chairman



Staff (L to R): Lana, Veronica and Elaine



(L to R): Mrs. Mindy Rosenfeld, Nicle and Carole



Staff (L to R): Nicole, Maria, Pat, Tanaesia, SHeneeza, Bibi, Billy's wife Katherine and Billy



Resident Thakkar, Marina Boruk, MD and her husband Boris

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DEPARTMENT EVENTS ANNUAL HOLIDAY PARTY



Staff (L to R): Lana, Saleh and Nadine



Resident Wasserman, his wife Corey and Resident Kaplowitz



A glance at the holiday party which was held at the CHINAR in Brooklyn



On the dance floor



On the dance floor



A glance at the holiday party which was held at the Chinar in Brooklyn



(L to R): Residents Ballard, Resident Wu and Resident Sukato

PUBLICATIONS

Abramowitz J, Thakkar P, Isa A, Truong A, Park C, **Rosenfeld RM**. Adverse Event Reporting for Proton Pump Inhibitor Therapy: An Overview of Systematic Reviews. *Otolaryngol Head Neck Surg*. 2016 May 17.

Alessi A, Boruk M. Core Competency Education in Communication and Systems-based Practice: Are We Failing Our Residents? *Int J Head Neck Surg* 2016;7(1):13-16

Butts SC. Patient Databases and Clinical Registries in Facial Plastic Surgery Research: Looking at Outcomes Data on a Broader Scale: Invited Commentary. *JAMA Facial Plastic Surgery* 2016 May 1;18(3):220-1

Butts SC, Floyd E, Lai E, **Rosenfeld RM**, Doerr T. Reporting of Postoperative Pain Management Protocols in Randomized Clinical Trials of Mandibular Fracture Repair: A Systematic Review. *JAMA Facial Plast Surg*. 2015 Nov-Dec;17(6):440-8.

Deborde S, Omelchenko T, Lyubchik A, Zhou Y, He S, McNamara W, **Chernichenko N**. Schwann cells induce cancer cell dispersion and invasion. *J Clin Invest*. 2016; 126(4):1538-1554.

Ferzli G, Bentsianov B. Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis. *Int J Head Neck Surg* 2016;7(1):51-52

Burton, M.J., **Goldstein, N.A., Rosenfeld, R.M.**: Cochrane Corner: Extracts from The Cochrane Library: Tonsillectomy or Adenotonsillectomy versus Non-Surgical Management for Obstructive Sleep-Disordered Breathing in Children. *Otolaryngol Head Neck Surg* 154:581-585, 2016.

Goldstein, N.A., Gorynski, M., Yip, C., Harounian, J., Huberman, H., Weedon, J.: Developmental Delay in Young Children with Sleep-Disordered Breathing Before and After Tonsil and Adenoid Surgery. *Int J Pediatr Otorhinolaryngol* 85:107-111, 2016.

Goldstein NA, Gitman L. Neonatal Nasal Deformities. *NeoReviews* 16:e36-e46, 2015.

Goldstein, N.A., Aronin, C., Kantrowitz, B., Hershcopf, R., Fishkin, S., Lee, H., Weaver, D.E., Yip, C., Liaw, C., Saadia, T.A., Abramowitz, J, Weedon, J: The Prevalence of Sleep-Disordered Breathing in Children with Asthma and its Behavioral Effects. *Pediatr Pulmonol* 50: 1128-1136, 2015.

Har-El G. Management of Early Laryngeal Cancer: The Role of Individualized Medicine. *Int J Head Neck Surg* 2016;7(1):23-28

Ho S, Kay DJ. Tympanostomy Tube Selection: A Review of the Evidence. *Int J Head Neck Surg* 2016;7(1):17-22

Kaplowitz LJ, Joseph EM. A Practical Approach for Learning Rhinoplasty Surgery. *Int J Head Neck Surg* 2016;7(1):33-46

Kohli N, Wasserman JM. Posttransplant Lymphoproliferative Disorder involving the Larynx. *Int J Head Neck Surg* 2016;7(1):53-56

Kohli NV, Verghese D, **Sundaram K**. A Review of the role of Endoscopic sinus surgery in the management of sinusitis complicated by extradural vs. subdural brain abscesses. *Otolaryngol Open J* 2016; 2(1): 43-46.

Das A, Fishero BA, Christophel JJ, Li CJ, **Kohli N**, Lin Y, Dighe AS, Cui Q. Poly(lactic-co-glycolide) polymer constructs cross-linked with human BMP-6 and VEGF protein significantly enhance rat mandible defect repair. *Cell Tissue Res*. 2016 Apr;364(1):125-35.

Mor N, Hanson M, Lucente FE: Diseases of the External Ear, in *Head and Neck Surgery*, 2nd edition: DeSouza C, Chaturvedi P, Langman A, Kenyon G, Nerurkar N, Swift (eds.), Delhi, Jaypee Brothers Medical Publishers, 2016

Mor N, Hernandez-Prera JC, Tang C, Blitzer A. Polyp within the Center of a Vocal Fold Sulcus: A Proposed Pathophysiologic Construct. *Int J Head Neck Surg* 2016;7(1):47-50

Plein CT, Harounian J, **Floyd E**, Irizarry R, **Ferzli G**, Kidwai S, **Rosenfeld RM**. A systematic review of eligibility and outcomes in tinnitus trials: reassessment of a tinnitus guideline. *Otolaryngol Head Neck Surg* 2016; 154:24-32.

Rosenfeld RM, Shin JJ, Schwartz SR, et al. Clinical practice guideline (update): otitis media with effusion. *Otolaryngol Head Neck Surg* 2016; 154(1S):S1-S41.

Rosenfeld RM. Shared decision-making and office insertion of tympanostomy tubes. *Otolaryngol Head Neck Surg* 2016; 154:807-9.

Wilson KC, Gould MK, Krishnan JA, **Rosenfeld RM**. An official American Thoracic Society workshop report: a framework for addressing multiple chronic conditions in clinical practice guidelines. *Ann Amer Thoracic Soc* 2016; 13:S12-S21.

O'Connor SS, Coggins R, Gagnon L, **Rosenfeld RM**, Shin JJ, Walsh SA. Plain language summary: otitis media with effusion. *Otolaryngol Head Neck Surg* 2016; 154:215-25.

Roditi RE, Liu CC, Bellmunt AM, **Rosenfeld RM**, Shin JJ. Oral antibiotic use for otitis media with effusion: ongoing opportunities for quality improvement. *Otolaryngol Head Neck Surg* 2016; 154:797-803.

Bellmunt AM, Vila PM, Chen JX, **Rosenfeld RM**, et al. Oral steroid usage for otitis media with effusion, eustachian tube dysfunction, and tympanic membrane retraction. *Otolaryngol Head Neck Surg* 2016; 155:139–146.

Reconstructive Flaps after Salvage Nasopharyngectomy. **Thakkar P**, Grossman A, Lin A, **Sundaram K**. *Otolaryngol Open J*. 2016: 2(1): 24-27.

Hoffer ME, Goldstein B, **Shulman A**. AAO HNS Tinnitus Miniseminar “Tinnitus Lessons Learned from Combat and Service”. Summary 2015. *Int Tinnitus J*. 2015; 19(2):7-11

Caspersen LA, Walter LM, Walsh, **Rosenfeld RM**, Piccirillo JF. Plain language summary: adults sinusitis (sinus infection). *Otolaryngol Head Neck Surg* 2015; 153:161-6.

Bhattacharyya N, Harvey RJ, **Rosenfeld RM**. Cochrane Corner: Interventions for chronic rhinosinusitis with polyps. *Otolaryngol Head Neck Surg* 2015; 153:315–319.

Rosenfeld RM, Nnacheta LC, Corrigan MD. Clinical consensus statement development manual. *Otolaryngol Head Neck Surg*; 2015; 153(Suppl 2S):S1-S14.

Han JK, Stringer SP, **Rosenfeld RM**, et al. Clinical consensus statement: septoplasty with or without inferior turbinate reduction. *Otolaryngol Head Neck Surg* 2015; 153:708-20.

Prince AA, **Rosenfeld RM**, Shin JJ. Antihistamine use for otitis media with effusion: ongoing opportunities for quality improvement. *Otolaryngol Head Neck Surg*; 2015; 153:935-42.

Rosenfeld RM, Sury K, Mascarinas C. Office insertion of tympanostomy tubes without anesthesia in young children. *Otolaryngol Head Neck Surg*; 2015; 153:1067-70.

Rosenfeld RM. Interpreting medical data. In: Cummings *Otolaryngology: Head and Neck Surgery*. 6th ed. Flint PW, Haughey BH, Richardson MA, et al. (eds). Philadelphia: Elsevier Publishing; 2015:10-27.

Sperling NM, Portnoy WM. To Swab or Not to Swab: Appropriate Medical Advice Regarding Self-Ear-Cleaning. *Int J Head Neck Surg* 2016;7(1):1-4

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 Vol.25, No.2, 2015. Pp 145-146.*

Sundaram K. Editorial: In support of nerve monitoring during thyroid surgery. *Otolaryngol Open J*. 2015; 1(1): e3-e4.

Weiss MH, Salant EP. In reference to: A novel role for otolaryngologists in the multidisciplinary difficult airway response team. Letter to the editor. *Laryngoscope* 2015; 125:E392

Orman R, **Kollmar R**, Stewart M. The claustrum of the short-tailed fruit bat, *Carollia perspicillata*: alignment of cellular orientation and functional connectivity. *Journal of Comparative Neurology*, in press.

Ferzli G, Bentsianov B. Dermatologic Manifestations of streptococcal infection: Tonsillectomy as treatment for guttate psoriasis. Accepted for publication 2016, *The International Journal of Head and Neck Surgery*

Lewis S, Earley M, **Rosenfeld RM**, **Silverman JS**. Surgical Treatment for Adult Laryngotracheal Stenosis, a Systematic Review. *The Laryngoscope*, Accepted for publication June 2016.

Lewis S, Arjomandi H, Rosenfeld RM. Systematic Review for Surgical Treatment for Pediatric Tracheo-cutaneous Fistula. *The Laryngoscope*, Accepted for Publication May 2016

Kohli, N. Case report on post transplant lymphoproliferative disorder of the larynx. Int'l J Head and Neck Surgery. Accepted for publication.

PRESENTATIONS

Richard Rosenfeld, MD, MPH

Antibiotics in otolaryngology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2016.

Clinical practice guidelines: recommendations vs. practice. European Society for Pediatric Otorhinolaryngology, Lisbon, Portugal, June 2016.

Otolaryngology as a career choice. SUNY Downstate Otolaryngology Club, Brooklyn, NY, April 2016. P values for the perplexed. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, April 2016.

Methodology for clinical practice guidelines. American Academy of Otolaryngology – Head and Neck Surgery, April 2016.

Patients satisfaction. Otolaryngology Grand Rounds, SUNY Downstate, March 2016.

Update on Regent and quality improvement: spotlight on performance measures. AAO-HNS Leadership Forum, Alexandria, VA, March 2016.

Performance measures and specialty societies: a win-win collaboration. AAO-HNS Specialty Unit Summit, Alexandria, VA, March 2016.

Patients satisfaction. Otolaryngology Grand Rounds, SUNY Downstate, March 2016.

Update on Regent and quality improvement: spotlight on performance measures. AAO-HNS Leadership Forum, Alexandria, VA, March 2016.

Performance measures and specialty societies: a win-win collaboration. AAO-HNS Specialty Unit Summit, Alexandria, VA, March 2016.

Indications and technique for pediatric endoscopic sinus surgery. Otolaryngology Grand Rounds, SUNY Downstate, January 2016.

Otolaryngology annual update and state of the department. Department Chairs and Leadership Conference, SUNY Downstate, January 2016.

Curriculum vitae workshop. Otolaryngology Grand Rounds, SUNY Downstate, December 2015.

Overview of clinical practice guideline methodology. AAO-HNS Rhinoplasty Guideline Development Group, Alexandria, VA, November 2015.

ACGME Core competency: interpersonal and communication skills. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, November 2015.

Developing and sustaining a G-I-N regional community. 12th G-I-N Conference, Amsterdam, Netherlands, October 2015.

Considering cost and value implications for developing trustworthy clinical practice guidelines. 12th G-I-N Conference, Amsterdam, Netherlands, October 2015.

AAO-HNS clinical practice guideline on otitis media with effusion. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

Understanding clinical practice guidelines. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

How to read and perform a systematic review. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

Editorial peer review. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

Evidence-based otitis media 2015. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

From evidence to best practice: clinical practice guidelines. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

AAO-HNS clinical practice guideline on adult sinusitis. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

Clinical consensus statements. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

AAO-HNS clinical consensus statement on septoplasty. AAO-HNS Annual Meeting, Dallas, TX, September 2015.

Sydney Butts, MD

Local Flaps and Soft Tissue Course. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2015.

Postoperative Analgesia Strategies for Mandibular Fracture Patients: A Survey of Facial Trauma Surgeons. Accepted-Poster Presentation at the 119th Combined Otolaryngology Spring Meetings, Chicago IL, May 2016

Hairy Polyp of the Nasal Cavity: Prenatal Diagnosis and Management of a Rare Lesion. Poster Presentation at the American Academy of Facial Plastic and Reconstructive Surgery Spring Scientific Meeting in conjunction with the Combined Otolaryngology Spring Meeting, Chicago IL, May 2016

Patterns of Orofacial Clefting in New York City From 1983-2010: The Impact of Ethnicity, Birthplace and Other Demographic Factors. Podium Presentation at the American Cleft Palate-Craniofacial Association Annual Meeting, Atlanta GA, April 2016

Reconstruction of Cleft Lip. Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, March 2016.

Boris Bentsianov, MD

The Larynx, Dysphonia, and Dysphagia. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2015.

Marina Boruk, MD

Imaging/Case Review –Rhinology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2016

Mortality & Morbidity Conference Format Discussion. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2015.

Natalya Chernichenko, MD

The Xenotransplantation in Zebrafish to Study Perineural Migration of Human Cancers. MSKCC Head and Neck Symposium, June 2016

Challenging cases: Thyroid and parathyroid diseases. Endocrine Grand Rounds, SUNY Downstate Medical Center, April 2016

A novel zebrafish model to study perineural invasion. The Sixth Annual Multidisciplinary Head and Neck Symposium: Update on Management of Salivary Neoplasms, SUNY Downstate Medical Center, Brooklyn NY, December 2015

Nira Goldstein, MD

Developmental Delay in Young Children with Sleep-Disordered Breathing Before and After Tonsil and Adenoid Surgery. Poster presentation at the American Society of Pediatric Otolaryngology Thirty-First Annual Meeting, Chicago, IL, May 19-22, 2016.

Etiology and Therapeutic Strategies of Common Pediatric Illnesses. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2015.

Eli Gordin, MD

Principles of Nasal Reconstruction. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, March 2016.

Free Flap Basics. SUNY Downstate Medical Center - Department of Otolaryngology Grand Rounds. August 2015.

Local Flaps and Soft Tissue Course. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2015.

Rehabilitation of facial nerve function following oncologic resection. The Sixth Annual Multidisciplinary Head and Neck Symposium: Update on Management of Salivary Neoplasms, SUNY Downstate Medical Center, Brooklyn NY, December 2015

Matthew Hanson, MD

Temporal Bone Radiology Review. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, November 2015.

Temporal Bone Pathology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2015.

Joint Otolaryngology/Pathology Conference. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2015.

Hearing and Balance. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2015.

Gady Har-El, MD

Salivary Gland Roundtable Discussion. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2015.

Richard Kollmar, PhD

A Rat Model to Simulate Seizure-Induced Laryngospasm. Metropolitan Association of College and University Biologists (MACUB) 48th Annual Conference. Montclair State University, Montclair, NJ.

A Rat Model to Simulate Seizure-Induced Laryngospasm. Annual Biomedical Research Conference for Minority Students (ABRCMS), Seattle, WA.

Obstructive Apnea due to Laryngospasm during Seizures, but not Central Apnea, Causes Hypoxic Cardiac Derangements in Rats. 44th Annual Meeting of the Society for Neuroscience, Chicago, IL.

Obstructive Apnea due to Laryngospasm during Seizures, but not Central Apnea, Causes Hypoxic Cardiac Derangements in Rats. 9th Congress of the International Society for Autonomic Neuroscience

(ISAN), held jointly with the American Autonomic Society, the European Federation of Autonomic Societies and Japan Society of Neurovegetative Research, Stresa, Italy.

Anesthetic-Dependent Air Flow and Vocal-Fold Motion in the Rat. American Academy of Otolaryngology-Head & Neck Surgery Foundation Annual Meeting, Dallas, TX.

Xenotransplantation in Zebrafish to Study Proliferation and Perineural Migration of Human Cancers. American Head & Neck Society 9th International Conference on Head and Neck Cancer, Seattle, WA.

Method for Tracheostomy Tube Placement in Mice. 11th Annual Metropolitan New York Resident Research Day Symposium, New York, NY.

The Role of the C1q Domain of Zebrafish Otolin1a in Otolith Morphogenesis. Annual Meeting of the American Society for Biochemistry and Molecular Biology, Boston, MA.

The Role of the C1q Domain of Zebrafish Otolin1a in Otolith Morphogenesis. International FishMed Conference on Zebrafish Research, Warsaw, Poland.

A Rat Model to Study Ictal and Postictal Disordered Breathing and Potential Interventions to Prevent Death. 39th Annual Midwinter Research Meeting of the Association for Research in Otolaryngology, San Diego, CA.

Abraham Shulman, MD

The effect of the novel calpain inhibitor ala-1.0 on traumatic brain injury,

Annual meeting of the Society of Neurosciences, Chicago, IL, October 2015

Joshua Silverman, MD, PhD

Cervical Mature Teratoma Masquerading as a Thyroglossal Duct Cyst in an Adult. Triologic Society Combined Sections Meeting, January, 2016.

A Rat Model to Study Ictal and Postictal Disordered Breathing and Potential Interventions to Prevent Death. Association for Research in Otolaryngology Meeting, San Diego, CA, February 2016

Krishnamurthi Sundaram, MD

ABEA poster presentation at COSM: “Novel use of continuous and evoked EMG for Marginal Mandibular nerve monitoring in submandibular gland excision and level I neck dissection”. May 2016

Nerve monitoring in salivary gland surgery. The Sixth Annual Multidisciplinary Head and Neck Symposium: Update on Management of Salivary Neoplasms, SUNY Downstate Medical Center, Brooklyn NY, December 2015

Poster presentation: Resilience of the Recurrent laryngeal Nerve” American Thyroid Association, Lake Buena Vista, FL, October 2015

The role of endoscopic sinus surgery in acute sinusitis complicated by extradural vs. subdural brain abscesses. American Rhinologic Society Annual Meeting, September 2015

Anesthetic-Dependent air flow and vocal-fold motion in the rat. AAOHNS Annual Meeting, Dallas, TX, September 2015

Thyroid and Parathyroid. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, August 2015

Richard Westreich, MD

Sinus Physiology. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, July 2015.

Jason Abramowitz, MD

“AAO-HNS Leadership Forum - BOG, Advocacy and SRF”, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, April 2016.

Voice outcomes for injection laryngoplasty in office and operating room. FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

Anthony Alessi, MD

Anesthetic-Dependent Air Flow and Vocal-Fold Motion in the Rat. FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

“Implants in Facial Reconstruction” Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, March 2016.

The Effect of Anesthesia on Vocal Fold Motion in a Rat Model. AAOHNS Annual Meeting, Dallas, TX, September 2015

Hamid Arjomandi, MD

Harmonization of the AAO-HNSF and IDSA sinusitis clinical practice guidelines: Comparing the evidence for recommendations FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

A Rat Model of Postobstructive Pulmonary Edema, Association of Research in Otolaryngology, MidWinter Conference, San Diego, CA, Feb 2016

Balloon Sinuplasty. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2016.

George Ferzli, MD

Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis. FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

Pediatric Mandible and Odontogenic. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, December 2015.

Resection of An Unusual Mandibular Mass. Annual Pediatric Airway Symposium. North Shore Long Island Jewish Medical Center, October 2015.

Resilience of the Recurrent Laryngeal Nerve in Thyroid Surgery. American Thyroid Association International Congress Poster, October 2015.

Basal Cell and Squamous Cell Cancer of the External Ear. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, September 2015.

Elizabeth Floyd, MD

Functional rhinoplasty cases and techniques. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, February 2016.

Poster presentation: Postoperative pain control protocols in mandibular fractures. Combined Otolaryngology Sections Meeting, Chicago, IL, May 2016.

Lyuba Gitman, MD

Mature teratoma masquerading as a thyroglossal duct cyst in an adult, Triologic Society Combined Sections Meeting, January, 2016

Sandra Ho, MD

“Swallowing outcomes after laryngectomy”. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, May 2016

Lee Kaplowitz, MD

Method for tracheostomy tube placement in mice . FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

Recurrent respiratory papillomatosis. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, April 2016.

Congenital nasal mass- Hairy poly, Combined Otolaryngology Sections Meeting, Chicago, IL, May 2016.

Nikita Kohli, MD

Asthma outcomes after adenotonsillectomy: a systematic review. FEL Alumni and Resident Research Day 2016, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

“Partial laryngectomy techniques for the treatment of early stage laryngeal cancer” Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, June 2016.

Poster presentation: Literature review on the treatment for subdural vs. extradural complications of acute sinusitis. American Rhinologic Society Annual Meeting, Dallas, TX, September 2015.

Sean Lewis, MD

Poster presentation: Novel use of continuous and evoked EMG for marginal mandibular nerve monitoring in submandibular gland excision and level 1 neck dissection. The American Broncho-Esophageal Association Annual Meeting at the Combined Otolaryngology Sections Meeting, Chicago, IL, May 2016.

“AAO-HNS Leadership Forum - BOG, Advocacy and SRF”, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, April 2016.

Punam Thakkar, MD

Necrotizing fasciitis. Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, January 2016

Transoral Robotic Surgery for Excision of a Nasopharyngeal Hemangioma. AAO-HNSF Annual Meeting, September 2015.

Derek Wu, MD

“AAO-HNS Leadership Forum - BOG, Advocacy and SRF”, Otolaryngology Grand Rounds, SUNY Downstate Medical Center, Brooklyn, NY, April 2016.

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 Otology, Head and Neck, Oncology, Pediatric Otolaryngology, and Facial Plastic and Reconstructive Surgery.

Kings County Hospital Center

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

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

Brooklyn Veterans Administration Medical Center

The Veterans Administration Hospital at Brooklyn is located in the southern corner of Brooklyn at the base of the Verrazano Bridge. This acute care facility has 392 beds. Associated with the main hospital is a long term care facility at St. Albans which is located in the eastern section of Brooklyn approximately 4 miles away. This institution has 443 acute and chronic care beds. The Otolaryngology service is a section of the Department of Surgery. This section is covered by 5 faculty members who are associated with the SUNY Health Science Center at Brooklyn. The attending staff has fellowship training in head and neck cancer surgery, otology and neuro-otology, facial plastics and reconstructive surgery. The Otolaryngology Section has operating room time 4 days a week. A senior resident functions as a chief resident and manages the ENT Service. The chief resident is responsible for all admissions, discharges, outpatient clinic visits and surgical scheduling, and also supervises the junior resident and reports directly to the section chief. The

junior resident's graduated responsibility in the operating room and clinic depends upon the resident's experience and capabilities. The resident scrubs on all surgical cases as either the surgeon or first assistant and is directly responsible for the care of the in patient service. The Otolaryngology Section currently has an outpatient clinic which meets four times a week and holds a tinnitus clinic every Friday. A head and neck tumor board has been established for every Monday where members of the chemotherapy, radiotherapy, radiology and pathology services are available to discuss head and neck cancer patients currently under treatment. An attending is assigned to each clinic to provide resident supervision and daily teaching rounds are performed by these attendings.

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

Maimonides Medical Center

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

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

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.

Manhattan Eye, Ear & Throat Hospital

Manhattan Eye, Ear & Throat Hospital (MEETH) opened its doors to patients on October 15, 1869 at its original location, 223 East 34th Street. At the time, much of the city did not have access to many vital services and the lack of basic healthcare drastically affected everyday life. Faced with this reality, the New York state legislature issued a charter to found a voluntary, non-profit hospital whose mission was to "...alleviate the sufferings of the poor, the prevention of pauperism, and the cultivation and diffusion of sound knowledge of all that relates to the diseases of the eye and ear." Since its founding, MEETH has built upon its proud tradition of providing patient-centered care and has grown to become the world-renowned facility that it is today.

MEETH and Lenox Hill Hospital joined Northwell Health in 2011. MEETH, which is located at 210 East 64th Street, is a specialized center that continues to focus on high-quality care for eye, ear and throat conditions. The center provides advanced treatments for thousands of patients each year, offering a range of services and expert care.

- **Areas of expertise in ambulatory medicine** include ophthalmology, otolaryngology (ENT), orthopaedics, podiatry, plastic surgery, urology, gynecology, dental surgery and general surgery.
- **17 operating rooms** equipped with the latest technology for surgery.
- **Highly specialized medical and clinical staff**, with skilled professionals across multiple disciplines collaborating to deliver the best care .
- **Six outpatient practices** including the Retroviral Disease Center, the Center for Attention and Learning, Outpatient Center for Mental Health, Ophthalmology, Otolaryngology and Plastic Surgery.

As of November 2013, the otolaryngology resident on the ambulatory care rotation spends two days per month at the Manhattan Eye, Ear and Throat Hospital (MEETH) performing cosmetic facial plastics cases and seeing office patients under the direction of Richard Westreich, MD. This rotation provides training in cosmetic facial plastic surgery, with both operating room and in-office procedures. Pre-operative and post-operative care is emphasized. Since the fall of 2015, residents are also spending two days per month with Sujana Chandrasekhar, MD, performing otologic cases.

GOALS AND OBJECTIVES

July 1, 2016 – June 30, 2017

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 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 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

PGY-1	Surgery (2 months selected from general surgery and pediatric surgery)	1 month in each of the following: Anesthesia (UHB), Critical Care (KCHC), Oral-maxillofacial surgery (KCHC), and Neurosurgery (KCHC)	Otolaryngology: 2 months at KCHC/ UHB and 4 months at Maimonides
PGY-2	KCHC/UHB	KCHC/UHB	Methodist
PGY-3	Research	BVAMC	KCHC/UHB
PGY-4	Ambulatory Care/MEETH	Maimonides	KCHC/UHB
PGY-5	Methodist	BVAMC	KCHC/UHB

ACGME Core Residency Training Competencies by Training Year

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* H&N Anatomy	Familiarity	Attend Basic Science Course	Attend Basic Science Course	In-depth knowledge	In-depth knowledge
Clinical medicine learning focus	Familiarity	Thorough understanding	In-depth knowledge	Mastery	Mastery
	Approach to the patient	Surgical indications and general otolaryngology	General otolaryngology and subspecialties	Otolaryngology subspecialties	Otolaryngology subspecialties
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 examinationACLS/ ATLSCentral line placementArterial blood gas samplingNasogastric tube placementFoley catheter placementIncision and drainage, simple abscessesManagement tracheostomy tubesBasic wound management	<ul style="list-style-type: none">Fine needle aspiration, neckInsertion of tracheostomy tubeDirect laryngoscopy, diagnosticI&D neck abscess	<ul style="list-style-type: none">Level 1 neck dissectionTracheotomyDeep lymph node excision/ biopsySubmandibular gland excisionCaldwell Luc procedureEsophagoscopy, diagnostic, dilationPanendoscopy with biopsy	<ul style="list-style-type: none">Superficial parotidectomySelective neck dissectionPartial glossectomyThyroidectomyParathyroidectomyExcision congenital neck mass, all types including thyroglossal duct and branchial cleft cystsEndoscopic approach hypopharynxLip wedge resectionOral cavity tumor resectionAuricular excision	<ul style="list-style-type: none">Total parotidectomy ± facial nerve graftTotal glossectomyRadical neck dissectionModified radical neck dissectionLateral rhinotomySkull base resection, anterior, middleComposite resection, oral cavity/oropharynxMandibular resectionParapharyngeal space tumor excisionMaxillectomy ± orbital exenterationLaryngopharyngectomyMajor vessel repair
Otology and neurotology	N/A	<ul style="list-style-type: none">Microscopic examination, external earIn-office adult myringotomy/ tubeAudiogram interpretationTympanogram interpretation	<ul style="list-style-type: none">Tympanoplasty, ISimple mastoidectomy	<ul style="list-style-type: none">Tympanoplasty I/IVMastoidectomy, canal wall downCanaloplastyResection cerebellopontine angle tumor, assistant	<ul style="list-style-type: none">OssiculoplastyStapedectomyTemporal bone resectionSkull base resection, lateralAural atresia repairFacial nerve decompressionRepair perilymphatic fistulaLabyrinthectomyCochlear implantationResection 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 testAllergy 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">Fiberoptic intubation, angioedema- onsillectomy	<ul style="list-style-type: none">Uvulopalatopharyngoplasty		
Laryngology	<ul style="list-style-type: none">Flexible laryngoscopy		<ul style="list-style-type: none">Bronchoscopy, diagnosticLaryngoscopy with excision	<ul style="list-style-type: none">Endoscopic laser ablation ± dilationlaryngotracheal stenosisLaryngoscopy with microflap excision, vocal fold massEndoscopic/ open excision Zerkner's diverticulumTracheoesophageal fistula creationArytenoidectomyEndoscopic posterior ethmoidectomyEndoscopic sphenoidectomyEndoscopic frontal sinusotomyFrontal sinus trephination	<ul style="list-style-type: none">Total laryngectomyPartial laryngectomy, open or endoscopicLaryngotracheoplastyRepair laryngeal fractureTracheal resection, anastomosisThyroplasty, arytenoid adductionInjection laryngoplastyEndoscopic repair CSF leakEndoscopic sphenopalatine ligationOsteoplastic frontal sinus obliterationAdvanced endoscopic frontal sinusotomyDacryocystorhinostomy
Sinonasal	<ul style="list-style-type: none">Flexible nasopharyngoscopy	<ul style="list-style-type: none">Anterior and posterior nasal packingSeptoplastySubmucous turbinate resection	<ul style="list-style-type: none">Endoscopic anterior ethmoidectomyEndoscopic maxillary antrostomyEndoscopic polypectomyEndoscopic nasopharyngeal biopsy		
Pediatric otolaryngology	N/A	<ul style="list-style-type: none">Foreign body removal, ear, nose, pharynxMyringotomy and tube placementTonsillectomyAdenoidectomyFrenuloplasty	<ul style="list-style-type: none">Excision congenital neck masses, all typesBronchoscopy, diagnostic, foreign body removalEsophagoscopy with foreign body removal	<ul style="list-style-type: none">Endoscopic management, laryngotracheal stenosisChoanal atresia repairOtoplastyTracheostomy, age under 2 years	<ul style="list-style-type: none">Laryngotracheal reconstruction, openLymphangioma excisionManagement subglottic hemangiomaExcision juvenile nasopharyngeal angiofibroma
Plastic and reconstructive surgery	<ul style="list-style-type: none">Suturing of uncomplicated lacerations	<ul style="list-style-type: none">Closed reduction, mandible fractureClosed reduction, nasal fractureExcision skin lesions, primary closure	<ul style="list-style-type: none">Reduction facial fractures, nasal, malar, orbital blowout, mandible, frontalPedicle flap procedure, localSplit and full thickness skin graftsRepair complex facial lacerationsScar revision	<ul style="list-style-type: none">Rhinoplasty, closedPedicle flap procedure, regionalReconstruction external earTissue expander placement, removalEyelid weight placementBrow liftRhytidectomy	<ul style="list-style-type: none">Pedicle flap procedure, myocutaneousRhinoplasty, openMicrosurgical free flapBlepharoplastyFacial nerve graft or repairFacial reanimation proceduresCleft palate. Cleft lip repair

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
Par 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 (prn)
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					

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 in 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).

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 2016 or early 2017.

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.



Conference attendees

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

ALUMNI AND RESIDENT RESEARCH DAY

Friday, June 10, 2016 ★ 9:30 am to 4:30pm

Lecture Hall 1B, 395 Lenox Road

Conference Chair

Natalya Chernichenko, MD
Assistant Professor of Otolaryngology
Chief of Head and Neck Surgery
SUNY Downstate Medical Center

Invited Faculty

Clarence Takashi Sasaki, MD, FACS
Charles W. Ohse Professor of Surgery
Yale School of Medicine

Bhuvanesh Singh, MD, PhD, FACS
Attending Surgeon
Memorial Sloan-Kettering Cancer Center



SUNY Downstate Faculty

Boris Bentsianov, MD
Assistant Professor

Frank E. Lucente, MD
Professor and Former Chairman

Richard M. Rosenfeld, MD, MPH
Professor and Chairman

SUNY Downstate Residents

Jason Abramowitz, MD
Anthony Alessi, MD
Hamid Arjomandi, MD
George Ferzli, MD
Elizabeth Floyd, MD
Lee Kaplowitz, MD
Nikita Kohli, MD
Punam Thakkar, MD
Jason Wasserman, MD

ALUMNI AND RESIDENT RESEARCH DAY

SUNY Downstate Medical Center – June 10, 2016

AGENDA

- 9:30 AM

Registration & Coffee
- 10:00

Welcome Remarks — N Chernichenko
- 10:05

Introduction – R Rosenfeld
- 10:10

Introduction – F Lucente
- 10:15

Pepsin or Bile? To thine ownself be true. – C Sasaki
- 11:00

New approaches to treating Head and Neck Cancer. – B Singh
- 11:45

Coffee Break
- 12:20 PM

Method for tracheostomy tube placement in mice – L Kaplowitz (PGY-3), R Kollmar, J Silverman, K Sundaram, N Kou, M Stewart
- 12:34

Anesthetic-Dependent Air Flow and Vocal-Fold Motion in the Rat – A Alessi (PGY-2), E Lazar, A Sutaria, D Varughese, J Silverman, K Sundaram, R Kollmar
- 12:46

Voice outcomes for injection laryngoplasty in office and operating room – J Abramowitz (PGY-3), D Ballard, A Sobhani, S Lewis, B Bentsianov, R Rosenfeld
- 1:00

Asthma outcomes after adenotonsillectomy: a systematic review – N Kohli (PGY-4); D DeCarlo, N Goldstein, J Silverman
- 1:13

Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis – G Ferzli (PGY-2), B Bentsianov
- 1:25

Lunch
- 2:25

Harmonization of the AAO-HNSF and IDSA sinusitis clinical practice guidelines: Comparing the evidence for recommendations – H Arjomandi (PGY-4), N Kohli, J Abramowitz, S Zhang, S Jones, A Shroyer, E Regenbogen
- 2:38

A Systematic Review of Functional Rhinoplasty using NOSE score – E Floyd (PGY-4), S Ho, E Gordin, R Rosenfeld
- 2:51

The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis – J Wasserman (PGY-5), M Boruk, R Rosenfeld
- 3:04

Secondary Clots in the Free-Flap Patient: Risk and Prophylaxis – E Cottrill, J Peck, P Thakkar (PGY-5), M Wax, S Cannady
- 3:17

Alumni Panel Discussion – Moderator: B Bentsianov
Panel – S Harris, N Patel, B Singh
- 4:07

Closing Remarks – N Chernichenko
- 4:10- 5:10

Alumni Reception



Front Row: Alumni (L to R): Bhuvanesh Singh, MD, PhD (1997), Invited Alumni, Krishnamurthi Sundaram, MD (1982), Boris Bentsianov, MD (2002), Marina Boruk, MD (2006), Frank E. Lucente, MD, Former Chairman, Samir Shah, MD (2001), Anthony Cultrara, MD (2003) and Alexander Ovchinsky, MD (2003)

ABSTRACTS FOR RESIDENT PRESENTATIONS 2016

12:20PM Kaplowitz L, Kollmar R, Silverman J, Sundaram K, Kou N, Stewart M
Method for tracheostomy tube placement in mice

Introduction: Airway management in laryngeal and upper airway research is fundamental to conducting experiments. Sudden Unexpected Death in Epilepsy (SUDEP) remains a poorly understood entity. Laryngospasm is theorized to play an important role in those affected. A strain of transgenic mice with lethal audiogenic seizures was used as a model for SUDEP. This study describes a novel technique of creation as well as survival surgical implantation of a tracheostomy tube in mice.

Methods: The Tracheostomy tube was constructed using 22G tubing. The tubes were surgically implanted and secured into mice (median age 18 days old). Audiogenic seizures were induced in the transgenic mice with tracheostomy tubes and survival rates were compared to those without surgical airways.

Results: Successful surgery was achieved in 8 out of 12 mice. Intraoperative death occurred in 4 mice while 8 mice had return of near normal functioning. Audiogenic seizures were induced in the surviving mice. The survival rates were compared to existing data on lethality of seizures in the specific strain of mice without any surgical airway. Data so far suggests there is no survival benefit to having a tracheostomy tube in place.

Conclusion: This study demonstrates the feasibility of airway management in a mouse model in a field that is mostly confined to larger mammal models. It also suggests laryngospasm may not be the cause of death at least in this mouse model.

12:34PM Alessi A, Lazar E, Sutaria A, Varughese D, Silverman J, Sundaram K, Kollmar R
Anesthetic-Dependent Air Flow and Vocal-Fold Motion in the Rat

Faculty mentor(s): Joshua Silverman, MD, PhD; Krishnamurthi Sundaram, MD; Richard Kollmar, PhD

Objective: Larynx dysfunction, such as vocal-fold paralysis or laryngospasm, causes pathological changes in vocal-fold motion and air flow. Studying the interplay of larynx function and respiration in animal models requires anesthesia. However, anesthesia by itself can change vocal-fold motion and air flow. In this study, we sought to identify anesthetics under which larynx function and respiration in the rat most closely resemble those of humans.

Methods: Adult Sprague-Dawley rats were either (1) awake or anesthetized with (2) isoflurane, (3) ketamine plus xylazine, or (4) ketamine plus medetomidine. Each treatment was tested at least twice and in 2 different animals. Air flow was measured by using head-out plethysmography. Vocal-fold motion in anesthetized animals was captured at the same time by quantitative videolaryngoscopy.

Results: Inspiratory air flow always formed a short, sharp peak, regardless of treatment. During expiration, 2 distinct airflow patterns occurred: In rats that were awake or anesthetized with isoflurane, the outward flow was low initially, forming an extended plateau, and rose to a peak only at the very end; this pattern was time reversed when compared to human expiration. In rats anesthetized with ketamine plus xylazine or medetomidine, in contrast, the outward peak occurred at the beginning of expiration and was followed by a gradual decrease or low plateau, as in humans. Vocal-fold closure always accompanied low expiratory air flow.

Conclusions: Choice of anesthetic affects the timing of air flow and vocal-fold motion in the rat. Ketamine anesthesia appears to most closely reproduces normal respiration in humans

ABSTRACTS FOR RESIDENT PRESENTATIONS 2016

12:20PM **Kaplowitz L, Kollmar R, Silverman J, Sundaram K, Kou N, Stewart M**
Method for tracheostomy tube placement in mice

Introduction: Airway management in laryngeal and upper airway research is fundamental to conducting experiments. Sudden Unexpected Death in Epilepsy (SUDEP) remains a poorly understood entity. Laryngospasm is theorized to play an important role in those affected. A strain of transgenic mice with lethal audiogenic seizures was used as a model for SUDEP. This study describes a novel technique of creation as well as survival surgical implantation of a tracheostomy tube in mice.

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Conclusions: Choice of anesthetic affects the timing of air flow and vocal-fold motion in the rat. Ketamine anesthesia appears to most closely reproduces normal respiration in humans

12:46PM **Abramowitz JM, Ballard D, Sobhani A, Lewis S, Bentsianov B, Rosenfeld RM**
VOICE OUTCOMES FOR INJECTION LARYNGOPLASTY IN OFFICE AND OPERATING ROOM

OBJECTIVES: To assist otolaryngologists in counseling patients with hoarseness who would benefit from injection laryngoplasty on whether or not to perform the procedure in the office versus the operating room by synthesizing evidence from published literature on comparative voice outcomes.

DATA: Cochrane library, CINAHL, PubMed

REVIEW METHODS: Systematic review using PRISMA reporting standards of English language articles that compared voice outcomes for in office and in the operating room injection laryngoplasty. Two independent investigators assessed study eligibility, rated the quality using Methodological Index for Non-Randomized Studies (MINORS), and abstracted data for comparative analysis.

RESULTS: Of a total of 253 unique articles, 2 studies met inclusion criteria, including one historical cohort and one prospective cohort study. Each study had a low risk of bias. One study measured voice outcomes using Voice Handicap Index (VHI-10), while the other study measured voice outcomes using Voice-Related Quality of Life (V-RQOL). The most common indication for injection laryngoplasty was unilateral vocal fold weakness. Both studies showed a significant improvement in respective voice outcome measure, with no significant difference between voice measures when comparing in office injection with injection in the operating room. One study noted adverse events to be higher in the office group, with the most common complication being aborted procedure.

CONCLUSION: Our systematic review makes it unlikely that large differences exist in post-procedure voice outcomes for injection laryngoplasty in the office versus the operating room, but the limited evidence has inadequate statistical power to exclude smaller differences.

1:00PM **Kohli N, DeCarlo D, Goldstein N, Silverman J**
Asthma outcomes after adenotonsillectomy: a systematic review
Faculty mentor: Silverman J

Outcome Objective: Perform a systematic review of asthma outcomes following adenoidectomy or adenotonsillectomy in the pediatric population. Our goal is to assess the effect of adenoidectomy or adenotonsillectomy on markers of asthma severity in children with obstructive sleep apnea.

Methods: We performed a systematic review using the PubMed, EMBASE, and CINAHL databases using search terms related to asthma, adenoidectomy, and adenotonsillectomy. Inclusion criteria were defined as pediatric subjects aged 18 years or younger with a history of asthma, undergoing adenoidectomy, or adenotonsillectomy for obstructive sleep apnea. Database studies and case studies with or without control groups were included in the study. Exclusion criteria were patients with follow-up greater than 1 year after surgery, craniofacial syndromes, or additional significant comorbidities.

Results : A total of 567 abstracts were identified; 549 were excluded immediately. Eighteen full-text articles were assessed for eligibility and four articles were included in the qualitative synthesis. These data are consistent in correlating adenotonsillectomy in asthmatic children with decreased asthma severity. Markers of asthma severity including respiratory medication use, emergency room visits for asthma-related symptoms, overall asthma symptoms, and asthma-related exacerbations were all significantly reduced following adenotonsillectomy.

Conclusion: We present a systematic review of asthma outcomes following surgical intervention for sleep apnea in the pediatric population. All included studies found clinically significant reductions in markers of asthma severity after adenotonsillectomy. Though further prospective trials are needed to determine a causal relationship between adenotonsillectomy and modulation of asthma, the compilation of data suggest a definitive association.

1:13PM Ferzli G, Bentsianov B
Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis
Faculty mentor: Bentsianov, B

Objective: Demonstrate the role of tonsillectomy as a treatment option for guttate psoriasis

Methods: Case Report and retrospective literature review of tonsillectomy as a treatment option for guttate psoriasis

Results: Adding to the literature of previously reported cases, we describe a case of a 28year old male with recurrent episodes of guttate psoriasis treated with tonsillectomy.

Conclusions: The data supporting the role of tonsillectomy for guttate psoriasis is limited and retrospective in nature. Our case report strengthens previously published data on the role of tonsillectomy for the treatment of guttate psoriasis, but further prospective study is needed.

2:25PM Investigators: Arjomandi H, Kohli K, Abramowitz J, Zhang S, Jones S, Shroyer A, Regenbogen E
Harmonization of the AAO-HNSF and IDSA sinusitis clinical practice guidelines: Comparing the evidence for recommendations
Faculty mentor: Richard Rosenfeld, MD, MPH

Objective: To compare and contrast the AAO-HNSF and IDSA sinusitis CPGs, including a detailed comparison of the strength of the evidence supporting each CPG’s recommendation. By means of this review, information is provided for both guideline development and implementation teams to support future harmonization activities in the goal to consolidate these two divergent AAO-HNSF and IDSA efforts into a single, unified clinical practice guideline. Importantly, the evidence-basis for both the overlapping and contradictory recommendations are summarized for end-user clinician team members. Thus, the target audience for this CPG comparison endeavor includes the specialties of otolaryngology, infectious diseases, allergy and immunology, emergency medicine, family practice, geriatrics, internal medicine and pulmonary medicine.

Methods: The scope, composition of development groups, methods of development, basic definitions, and evidence provided supporting each recommendation was evaluated. Key action statements and recommendations that conceptually overlap, evidence-based intersections, will be presented. Statements regarding the strength of recommendations and quality of evidence from each guideline will be presented as well. The Appraisal of Guidelines for Research & Evaluation (AGREE) II instrument was used for evaluation.

Conclusions: While five of the key action statements in the AAO-HNSF CPG were felt to have significant topical overlap with fifteen evidence-based statements of the IDSA CPG, four key subject areas were felt to be notably different. The lower score for the IDSA CPG was reflective of questions regarding stakeholder involvement, applicability and editorial independence. Overall reviewers of the IDSA sinusitis CPG assessed the guideline as recommended, with modification

2:38PM Floyd E, Ho S, Gordin E, Rosenfeld RM
A Systematic Review of Functional Rhinoplasty using NOSE score
Faculty mentors: Rosenfeld RM, Gordin E

Objectives: To provide aggregate data regarding the ability of functional rhinoplasty to improve nasal obstruction as measured by the NOSE score

Introduction: In 2004, Stewart developed the NOSE for nasal obstruction. Rhee’s systematic review in 2008 evaluated the utility of functional rhinoplasty demonstrating significant evidence for functional rhinoplasty without aggregate data due to heterogeneity. This systematic review seeks to provide aggregate data on the efficacy of functional rhinoplasty with NOSE score.

Methods: A search of PubMed, Embase and Cochrane was performed using terms, “nasal obstruction” and “rhinoplasty”. Studies evaluating the effect of functional rhinoplasty on nasal obstruction with NOSE score were included. Case reports, editorials, narratives and articles that did not use NOSE score were excluded. Functional rhinoplasty was defined as surgery on the nasal valve.

This search resulted in 665 articles. After dual investigator independent screening, 16 articles remained. Study results were pooled using a random-effects model of meta-analysis. Change in NOSE score after surgery was assessed using the mean difference between baseline and postoperative results and the standardized mean difference. Heterogeneity was assessed and reported using the I2 statistic.

Results: Patients in the included studies had moderate to severe nasal obstructive symptoms at baseline. The NOSE scores were substantially improved at 3-6 months, 6-12 months, and 12 or more months, with absolute reductions of 50 points (95% CI, 45 to 54), 43 points (95% CI, 36 to 51), and 49 points (95% CI, 39 to 58), respectively. All of these analyses showed high heterogeneity.

Conclusions: Nasal obstruction as measured by the NOSE survey is substantially reduced for up to 12 months after rhinoplasty and may persist beyond 12 months. Our confidence in these results is limited by heterogeneity among studies, large variability in outcomes beyond 12 months, and by the inherent potential for bias in observational studies

2:51PM Wasserman J, Boruk, M, Rosenfeld RM
The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis
Faculty mentor(s): Boruk M, Rosenfeld RM

Objective: Provide insight into the current best evidence regarding the role that corticosteroids play in the treatment of orbital complications of ABRS and assess our confidence in that evidence.

- Methods:**
1. Search literature and document search strategy (including ophthalmology literature)
 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
 9. Survey Member of ASPO and ARS

Results: The data in the literature regarding the use of corticosteroids in the treatment of orbital complications of ABRS is limited. Only 2 studies met inclusion criteria. Of these two articles, they were limited by small cohorts and that there was no standardization on the route or type of steroid administered as well as the type of initial antibiotics that were used. One article showed a statistical difference only in the total number of hospitalization days which was decreased in the steroid group. Otherwise, there was no change in the need for surgery. No adverse outcomes were reported.

Conclusions: Corticosteroids are a frequently prescribed medication in the treatment of orbital complications of ABRS. There is clearly a paucity of data in the literature to support this use and more high quality studies are recommended moving forward

2:51PM 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.

3:04PM Secondary Clots in the Free-Flap Patient: Risk and Prophylaxis Investigators: Cottrill E, Peck JJ, Thakkar P, Wax MK, MD, Cannady SB

Objectives: (1) Analyze Caprini Risk Score in patients undergoing head and neck oncologic surgery with free flap. (2) Evaluate the incidence of secondary thrombotic events in failed free flaps.

Methods: A 2-surgeon prospective data collection and analysis was carried out for patients undergoing free flap reconstruction between 2000 and 2014 who required reoperation for flap compromise. Postoperative thrombotic events were recorded, as was flap salvage success. Caprini Risk Scores were calculated and compared with recently published data for similar patient populations.

Results: Of 2073 free flaps performed, 144 required reoperation for arterial or venous compromise (6.9%), with 84 ultimately salvaged (56.4%). In the compromised-flap group, 9 (6.25%) secondary clotting events occurred: 2 myocardial infarctions (1.3%), 4 thrombotic strokes (2.65%), 1 isolated deep vein thrombosis (0.65%), and 2 pulmonary embolisms (1.3%). All secondary clots occurred in patients whose flap was ultimately unsalvageable (14.1% versus 0% in salvaged cases). Patients developing secondary clots had a mean Caprini Risk Score of 16.2 (SD 5.0), double that of patients with flap compromise and no secondary clot (7.3, SD = 3.1, $P = .007$). Chemoprophylaxis (aspirin, subcutaneous heparin, or heparin drip) was used in 51% of patients, including 77% of patients sustaining secondary clots. Bleeding complications occurred in 25% of patients on chemoprophylaxis versus 7.7% in those receiving only compression stockings ($P = .01$).

Conclusions: Incidence of secondary clots in our failed-flap population remained within range of recently published risk for head and neck surgery with free flap. Using risk stratification tools preoperatively could individualize anticoagulation protocols, maximize flap survival, and prevent secondary thrombotic events, although at the risk of increased bleeding complications.

ANNUAL FRANK E. LUCENTE ALUMNI AND RESIDENT RESEARCH DAY



Alumni Panel (L to R): Bhuvanesh Singh, MD, PhD (1997), Nilesh Patel, MD (2000), Alexander Ovchinsky, MD (2003) and Scott Harris, MD (2015)



Conference attendees



Conference attendees



(L to R): Richard Rosenfeld, MD, MPH, Distinguished Professor and Chairman, Clarence T. Sasaki, MD, Invited Faculty, Bhuvanesh Singh, MD, PhD, Invited Alumnus, Natalya Chernichenko, MD, Conference Chair, and Frank E. Lucente, MD, Former Chairman



Clarence T. Sasaki, MD, Invited Faculty at the podium



Bhuvanesh Singh, MD, PhD, Invited Alumnus at the podium

THE 6TH ANNUAL
Multidisciplinary Head & Neck
Symposium:
Update in Management of Salivary Neoplasms
THURSDAY, DECEMBER 3, 2015

Faculty

Natalya Chernichenko, M.D.
Assistant Professor of
Otolaryngology
Chief, Head and Neck Surgery
Department of Otolaryngology
SUNY Downstate Medical Center

Eli Gordin, M.D.
Assistant Professor of
Otolaryngology
Department of Otolaryngology
SUNY Downstate Medical Center

Gady Har-El, M.D., F.A.C.S.
Professor, Departments
of Otolaryngology and
Neurosurgery, SUNY Downstate
Medical Center
Chief, Head & Neck Surgery &
Oncology
Lenox Hill Hospital
New York Head and Neck
Institute / Northshore-LIJ Health
System

Nancy Lee, M.D.
Vice Chair, Department of
Radiation Oncology
Memorial Sloan-Kettering Cancer
Center

Deborah Reede, M.D.
Professor of Radiology
Chair of Radiology
SUNY Downstate Medical Center

**Richard M. Rosenfeld, M.D.,
M.P.H., F.A.A.P.**
Professor and Chairman
Department of Otolaryngology
SUNY Downstate Medical Center

Iuliana Shapira, M.D.
Chair of Hematology and
Oncology
SUNY Downstate Medical Center

**Krishnamurthi Sundaram,
M.D., F.A.C.S.**
Clinical Professor of
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Department of Otolaryngology
SUNY Downstate Medical Center

Richard J. Wong, M.D.
Professor of Otolaryngology
Chief, Head and Neck Service
Memorial Sloan-Kettering Cancer
Center

SYMPOSIUM DIRECTOR
Natalya Chernichenko, M.D.

SYMPOSIUM CO-DIRECTORS
Eli Gordin, M.D.
Krishnamurthi Sundaram, M.D.

The 6th Annual Multidisciplinary Head & Neck Symposium:
Update in Management of Salivary Neoplasms

Agenda	
7:30-8:00 AM	Registration and Continental Breakfast
8:00-8:05	Welcome Richard Rosenfeld, M.D., M.P.H, F.A.A.P.
8:05-8:10	Remarks Gady Har-El, M.D., F.A.C.S.
8:10-8:15	Introduction Natalya Chernichenko, M.D.
8:15-9:00	Salivary carcinomas and perineural invasion. Richard Wong, M.D.
9:00-9:45	Salivary gland cancer: radiation oncology perspective Nancy Lee, M.D.
9:45-10:15	Imaging of perineural tumor spread Deborah Reede, M.D.
10:15-10:45	Coffee Break
10:45-11:15	Nerve monitoring in salivary gland surgery Krishnamurthi Sundaram, M.D.
11:15-11:45	A novel zebrafish model to study perineural invasion. Natalya Chernichenko, M.D.
11:45-12:15	Rehabilitation of facial nerve function following oncologic resection. Eli Gordin M.D.
12:15-1:15	Lunch
1:15- 1:45	Advances in treatment of treatment of salivary gland tumors Iuliana Shapira, M.D.
1:45-2:30	Salivary neoplasms: challenging cases. Moderator: Gady Har-El, M.D. Panel discussion. Panelists: Richard Wong, M.D., Nancy Lee, M.D., Natalya Chernichenko, M.D., Iuliana Shapira, M.D.
2:30	Closing remarks

ANNUAL HEAD AND NECK CONFERENCE AT NEW YORK METHODIST HOSPITAL



Annual Multidisciplinary Head & Neck Symposium



Conference Attendees



(L to R) Krishnamurthi Sundaram, MD, Natalya Chernichenko, MD, and Eli Gordin, MD



(L to R) Nancy Lee, MD, Invited Speaker, Krishnamurthi Sundaram, MD, Natalya Chernichenko, MD, Eli Gordin, MD, Gady Har-El, MD and Richard Wong, MD, Invited Speaker



(L to R) Conference staff, Bibi Beckles, Lystra Cudjoe, Nicole Fraser and Frederick Avery at the back

GRAND ROUNDS 2015-2016

CONFERENCE	DATE	TIME	SPEAKER
Resident Orientation	7/2/15	6:30-9:50	Richard Rosenfeld, MD Nira Goldstein, MD
Research Review and Methodology	7/9/15	6:30-7:00	Nira Goldstein, MD
Hearing and Balance	7/9/15	7:00-7:50	Matthew Hanson, MD
Audiogram	7/9/15	8:00-8:50	John Weigand, AuD
Multidisciplinary Head & Neck Tumor Board	7/9/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
ACGME-Related Discussion: Duty Hours, Escalation, and Patient Handoff Policies,	7/16/15	6:30-7:00	Nira Goldstein, MD
Local Flaps and Soft Tissue Course	7/9/15	7:00-8:50	Sydney Butts, MD Eli Gordin, MD
COCLIA	7/16/15	9:00-9:50	Jason Wasserman, MD
Core Clinical	7/23/15	6:30-7:00	
Quality Improvement Conference	7/23/15	7:00-7:50	Richard Rosenfeld, MD
Microbiology and Antibiotics in Otolaryngology	7/23/15	8:00-8:50	Richard Rosenfeld, MD
Multidisciplinary Head & Neck Tumor Board	7/23/15	9:00 -9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Medical Student Presentations	7/30/15	6:30-7:00	
The Larynx, Dysphonia, and Dysphagia	7/30/15	7:00-7:50	Boris Bentsianov, MD
Sinus Physiology	7/30/15	8:00-8:50	Richard Westreich, MD
Mock Oral Boards	7/30/15	9:00-9:50	Marina Boruk, MD
Core Competency and Residency Issues: New Innovations and case logs	8/6/15	6:30 -7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Embryology of the Head & Neck	8/6/15	7:00-7:50	Jessica Lim, MD
“S.L.P and ENT”	8/6/15	8:00-8:50	Tasaynia Sebro
COCLIA	8/6/15	9:00-9:50	Jason Wasserman, MD
Research Review: Perineural Invasion in Head and Neck Cancer of Zebrafish	8/13/15	6:30-7:00	Medical Student: Juliet Meir

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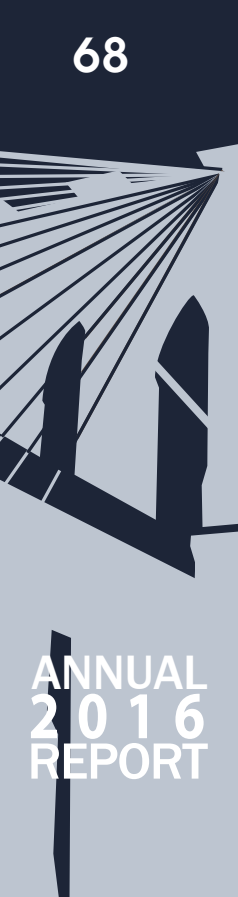
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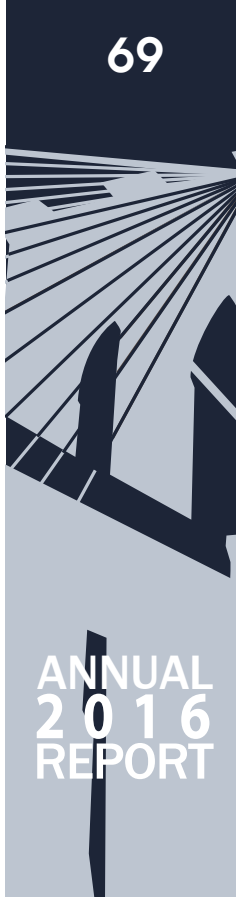
Etiology & Therapeutic Strategies: Common Pediatric Illness	8/13/15	7:00 -7:50	Nira Goldstein, MD
Free Flap Basics	8/13/15	8:00 -8:50	Eli Gordin, MD
Multidisciplinary Head & Neck Tumor Board	8/13/15	9:00 -9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
ACGME-Related Discussion: New Innovations, Surgical Case Logs	8/20/15	6:30-7:00	Richard Rosenfeld, MD
Quality Improvement Conference	8/20/15	7:00-7:50	Richard Rosenfeld, MD
Thyroid/Parathyroid	8/20/15	8:00-8:50	K. Sundaram, MD
COCLIA	8/20/15	9:00-9:50	Jason Wasserman, MD
Salivary glands roundtable discussion	8/27/15	6:30-7:15	Gady Har-El, MD
Quality Improvement Conference: Conference format discussion	8/27/15	7:15-8:30	Marina Boruk, MD
Core Clinical: Local Anesthetic Blocks in ENT	8/27/15	8:30-9:00	Lee Kaplowitz, MD
Multidisciplinary Head & Neck Tumor Board 8/27/15	9:00 -9:50		Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Competency and Residency Issues: Patient Care, Work Hours	9/3/15	6:30-7:00	Richard Rosenfeld, MD
Journal Club	9/3/15	7:00-7:50	Richard Rosenfeld, MD
Amplification in Audiology COCLIA	9/3/15 9/3/15	8:00 -8:50 9:00-9:50	John Weigand, AuD, Jason Wasserman, MD
Research Review and Methodology	9/10/15	6:30-7:00	Nira Goldstein, MD
Temporal Bone Pathology	9/10/15	7:00-7:50	Matthew Hanson, MD
Joint Otolaryngology/Pathology Conference	9/10/15	8:00-8:50	Matthew Hanson, MD Raavi Gupta, MD
Multidisciplinary Head & Neck Tumor Board	9/10/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
ACGME-Related Discussion: Patient Care, Work Hours	9/17/15	6:30-7:00	Nira Goldstein, MD

Chronic Otitis Media	9/17/15	7:00-7:50	S. Chandrasekar, MD
Dizziness and Vertigo in Traumatic Brain Injury	9/17/15	8:00-8:50	S. Chandrasekar, MD
COCLIA	9/17/15	9:00-9:50	Jason Wasserman, MD
Core Clinical: Core Clinical: Basal Cell and Squamous Cell Cancer of the External Ear	9/24/15	6:30-6:45	George Ferzli, MD
Medical Student Presentations	9/24/15	6:45-7:00	
Quality Improvement Conference	9/24/15	7:00-7:50	
Evaluation of Dizzy Patients	9/24/15	8:00-8:50	Yu Mary Ying, MD
Multidisciplinary Head & Neck Tumor Board	9/24/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Competency and Residency Issues: Issues: Medical Knowledge, Practice-Based Learning & Improvement	10/1/15	6:30-7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Congenital Hearing Loss	10/1/15	7:00-7:50	J. Abramowitz, MD
Journal Club	10/1/15	8:00-8:50	Richard Rosenfeld, MD
COCLIA	10/1/15	9:00-9:50	Jason Wasserman, MD
Research Review & Methodology:	10/8/15	6:30-7:00	Nira Goldstein, MD
Hearing Loss Mini-series: Hearing Loss - New Perspectives	10/8/15	7:00-7:25	Neil Sperling, MD
Hearing Loss Mini-series: Coping with Hearing Loss- An ENT Physician's Perspective	10/8/15	7:25-7:50	Scott Gold, MD
Hearing Loss Mini-series: Thinking Differently about Hearing Assistance. A Music Composer's Perspective	10/8/15	8:00-8:25	R. Einhorn, MD
Hearing Loss Mini-series: Helping the Patient Accept Amplification: An Audiologist's Perspective	10/8/15	8:25-8:50	Marc D'Aprile, Sc.D
Multidisciplinary Head & Neck Tumor Board	10/8/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
ACGME-Related Discussion:	10/15/15	6:30-7:00	Nira Goldstein, MD
Quality Improvement Conference	10/15/15	7:00-7:50	





Otologic Imaging	10/15/15	8:00-8:50	Craig Linden , MD
COCLIA	10/15/15	9:00-9:50	Jason Wasserman, MD
Faculty Core Clinical: Glomus/ Paraganglioma of the Temporal Bone	10/22/15	6:30-7:00	Sean Lewis, MD
Pediatric Mid-face and Orbital Fractures	10/22/15	7:00-7:50	Travis Tollefson, MD
Frontal Sinus Injury Management: A Paradigm Shift to Conservative Treatment	10/22/15	8:00-8:50	Travis Tollefson, MD
Multidisciplinary Head & Neck Tumor Board	10/22/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Grand rounds cancelled due to Pediatric Airway Symposium	10/29/15		
Core Competency and Residency Issues: Professionalism, Interpersonal and Communication Skills	11/5/15	6:30-7:00	Richard Rosenfeld, MD Nira Goldstein, MD
GABHS: A Unique Bug	11/5/15	7:00-7:50	Ari Goldsmith, MD
Journal Club	11/5/15	8:00-8:50	
COCLIA	11/5/15	9:00-9:50	Jason Wasserman, MD
Research Review & Methodology:	11/12/15	6:30-7:00	Nira Goldstein, MD
Vascular Anomolies in Children	11/12/15	7:00-7:50	Jeffery Cheng, MD
Aspiration in the Pediatric Population	11/12/15	8:00-8:50	Lyuba Gitman, MD
Multidisciplinary Head & Neck Tumor Board	11/12/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Temporal Bone Radiology Review	11/19/15	6:30-7:00	Matthew Hanson, MD
Challenging (for me) Cases	11/19/15	7:00-7:50	Eli Grunstein, MD
Quality Improvement Conference	11/19/15	8:00-8:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
COCLIA	11/19/15	9:00 – 9:50	Jason Wasserman, MD
Grand rounds cancelled due to Thanksgiving	11/26/15		
Annual Head and Neck Symposium	12/3/15		



Grand rounds Cancelled - Residency Interviews	12/10/15		
ACGME Related Discussion: Systems- Based Practice, ACGME Resident Survey	12/17/15	6:30-7:00	Richard Rosenfeld, MD Nira Goldstein, MD
“Ethics of precision medicine in head and neck cancer management”	12/17/15	7:00-7:50	Andrew Shuman, MD
Case Presentations and Discussion	12/17/15	8:00 -9:50	
AO Core Clinical	12/24/15	6:30 -7:00	Nikita Kohli MD Jason Abramowitz, MD Lee Kaplowitz, MD
Quality Improvement Conference	12/24/15	7:00-7:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Pediatric Mandible and Odontogenic Masses	12/24/15	8:00-8:50	George Ferzli, MD
Multidisciplinary Head & Neck Tumor Board	12/24/15	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Mentoring Meetings/ Curriculum Vitae Clinic	12/31/15	6:30-7:00	
Risk of neurotoxicity in children from General anesthesia: where are we now?	12/31/15	7:00-7:50	Marisa Earley, MD
Journal Club	12/31/15	8:00-8:50	
COCLIA	12/31/15	9:00 -9:50	Jason Wasserman, MD
Grand rounds Cancelled - Residency Interviews	1/7/16		
Research Review and Methodology	1/14/16	6:30-7:00	Nira Goldstein, MD
Indications and Technique for Pediatric Antrostomy and Ethmoidectomy	1/14/16	7:00-7:50	R. Rosenfeld, MD
Journal Club	1/14/16	8:00-8:50	
Multidisciplinary Head & Neck	1/14/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Imaging/Case Review - Rhinology	1/21/16	6:30-7:00	Marina Boruk, MD

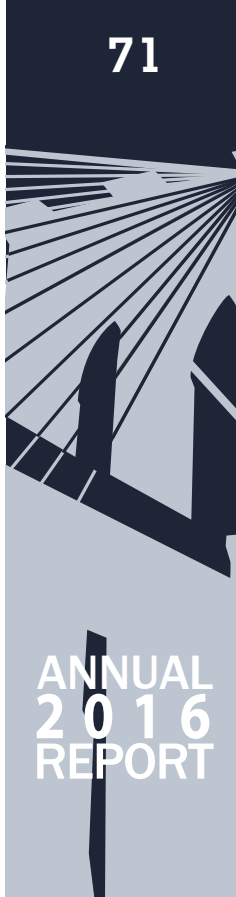


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Quality Improvement Conference	1/21/16	7:00-7:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Updates in Rhinology 2016	1/21/16	8:00-8:50	Roheen Raithatha, MD
Core Clinical: Necrotizing Fasciitis	1/28/16	6:30-7:00	Punam Thakkar, MD
Trans-Sphenoidal Pituitary Surgery	1/28/16	7:00-7:50	Richard Lebowitz, MD
Balloon Sinuplasty	1/28/16	8:00-8:50	Hamid Arjomandi, MD
Multidisciplinary Head & Neck Tumor Board	1/28/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Resident audiology practical session	2/4/16	7:00-9:00	John Weigand, PhD
Research Review and Methodology: Statistical Inference	2/11/16	6:30-7:00	Nira Goldstein, MD
Comprehensive Management of Facial Nerve Paralysis	2/11/16	7:00-7:50	Joshua Rosenberg, MD
Journal Club	2/11/16	8:00-8:50	
Multidisciplinary Head & Neck Tumor Board	2/11/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Clinical	2/18/16	6:30-7:00	Punam Thakkar, MD
Implantable Neurostimulators in the Treatment of Sleep Apnea	2/18/16	7:00-7:50	Maria Suurna, MD
Functional Rhinoplasty Cases and Techniques	2/18/16	8:00-8:50	Elizabeth Floyd, MD
Core Competency and Residency Issues: Surgical Case Logs	2/25/16	6:30-7:00	Richard Rosenfeld, MD
Quality Improvement Conference	2/25/16	7:00-7:50	Richard Rosenfeld, MD
A Practical Approach to Learning Rhinoplasty Surgery	2/25/16	8:00-8:50	Eric Joseph, MD
Multidisciplinary Head & Neck Tumor Board	2/25/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Competency and Residency Issues: Patient Care, Work Hours	3/3/16	6:30-7:00	Richard Rosenfeld, MD
Reconstruction of Cleft Lip	3/3/16	7:00-7:50	Sydney Butts, MD

Nasal Reconstruction	3/3/16	8:00-8:50	Eli Gordin, MD
Research Review	3/10/16	6:30-7:00	Nira Goldstein, MD
Multidisciplinary Approach to Concussion	3/10/16	7:00-7:50	Christine Persaud, MD Walter Valesky, MD Yaacov Anziska MD
Journal Club	3/10/16	8:00-8:50	
Multidisciplinary Head & Neck Tumor Board	3/10/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Imaging and Case Review	3/17/16	6:30-7:00	
Multidisciplinary Head & Neck Tumor Board	3/17/16	7:00-7:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
"Implants in Facial Reconstruction"	3/17/16	7:00-7:50	Anthony Alessi, MD
Department of Otolaryngology Photos	3/17/16	8:00-8:30	
Resident focused talk: Local Skin Flaps and Scar Camouflage	3/17/16	8:30-8:50	
Core Clinical	3/24/16	6:30-7:00	Punam Thakkar, MD
Quality Improvement Conference	3/24/16	7:00-7:50	Richard Rosenfeld, MD
Blepharoplasty	3/24 /16	8:00-8:50	C. Jeanniton, MD
Multidisciplinary Head & Neck Tumor Board	3/24/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Mentor Meeting	3/24 /16	6:30-7:00	
Cancer of the Temporal Bone	3/24/16	7:00-7:50	Chris de Souza, MS, DORL, DNB, FACS
"Rational Use of Neurotoxins and Soft Tissue Fillers in Facial Plastic Surgery"	3/24/16	8:00-8:50	A. Sclafani, MD
Core Competency and Residency Issues: Practice Based Learning and Improvement	4/7/16	6:30-7:00	Richard Rosenfeld, MD Nira Goldstein, MD
Functional Assessment of Swallowing Nonsurgical Management of Swallowing Disorders	4/7/16	7:00-7:50	Alexandra Soyfer, SLP
Recurrent Respiratory Papillomatosis	4/7/16	8:00-8:50	Lee Kaplowitz, MD
Research Review	4/14/16	6:30-7:00	Nira Goldstein, MD



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ENT/Anesthesia Grand Rounds	4/14/16	7:00-7:50	Ketan Shevde, MD Sydney Butts, MD
Journal Club	4/14/16	8:00-8:50	
Multidisciplinary Head & Neck Tumor Board	4/14/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Imaging and Case Review: Stroboscopy Session	4/21/16	6:30-7:00	
“Laryngeal Dystonia”	4/21/16	7:00-7:50	Niv Mor, MD
Resident Focused Education: Vocal Fold Immobility	4/21/16	8:00-8:50	Niv Mor, MD
“AAO-HNS Leadership Forum - BOG, Advocacy and SRF”	4/28/16	6:30-7:00	Sean Lewis, MD Jason Abramowitz, MD Derek Wu, MD
Quality Improvement Conference	4/28/16	7:00-7:50	Richard Rosenfeld, MD
“New Trends in Management of Pediatric Airway Disorders”	4/28/16	8:00-8:50	Vikash Modi, MD
Multidisciplinary Head & Neck Tumor Board	4/28/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Competency and Residency Issues: Professionalism, Interpersonal and Communication Skills	5/5/16	6:30-7:00	R. Rosenfeld, MD Nira Goldstein, MD
“THE CHANGING FACE OF ESOPHAGEAL CANCER: the fastest growing cancer in America and Europe”	5/5/16	7:00-7:50	R. Rosenfeld, MD
“Swallowing Outcomes after Laryngectomy”	5/5/16	8:00-8:50	Sandra Ho, MD
Research Review	5/12/16	6:30-7:00	Nira Goldstein, MD
“Quality Assurance in Otolaryngology”	5/12/16	7:00-7:50	Rahul Shah, MD
Journal Club	5/12/16	8:00-8:50	
Multidisciplinary Head & Neck Tumor Board	5/12/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Grand Rounds cancelled due to COSM	5/19/16		
Medical student presentations	5/26/16	6:30-7:00	

Quality Improvement Conference	5/26/16	7:00-7:50	Richard Rosenfeld, MD
“Adverse Events in Medicine: Medicolegal Implications for Surgeons”	5/26/16	8:00-8:50	R. Goldberg, JD, MD
Multidisciplinary Head & Neck Tumor Board	5/26/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Core Competency and Residency Issues: Systems-Based Practice ACGME Resident Survey	6/2/16	6:30-7:00	R. Rosenfeld, MD
“Operative Management of Esophageal Cancer: A Thoracic Surgical Perspective”	6/2/16	7:00-7:50	Angelo Reyes, MD
Partial Laryngectomy Techniques for the Treatment of Early Stage Laryngeal Cancer	6/2/16	8:00-8:50	Nikita Kohli, MD
Annual Alumni and Resident Research Day	6/10/16		
Imaging and Case Review: Rhinology	6/16/16	6:30-7:00	Marina Boruk, MD
“Transoral robotic surgery for HPV- related oropharyngeal carcinoma”	6/16/16	7:00-7:50	Raymond Chai, MD
Journal Club	6/16/16	8:00-8:50	
Core Clinical	6/23/16	6:30-7:00	Anthony Alessi, MD
Quality Improvement Conference	6/23/16	7:00-7:50	Richard Rosenfeld, MD
Parapharyngeal Space Tumors	6/23/16	8:00-8:50	Snehal G. Patel, MD Hilda E. Stambuk MD
Multidisciplinary Head & Neck Tumor Board	6/23/16	9:00-9:50	Gady Har El, MD N. Chernichenko, MD P. Han, MD D. Reede, MD K. Sundaram, MD
Resident Orientation	6/30/16	6:30-9:50	Richard Rosenfeld, MD Nira Goldstein, MD

OTOLARYNGOLOGY RESIDENTS July 1, 2015- June 30, 2016

Fifth 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

Fourth 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

Third 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

Second 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

First Year Otolaryngology



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

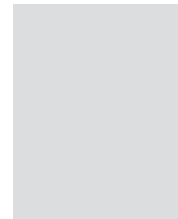


Derek Wu, MD
College: University of California - 2011
Medical School: Albert Einstein College of Medicine of Yeshiva University
Internship: UNY – Health Science Center at Brooklyn - 2016

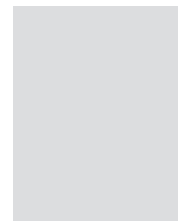
Incoming Residents (Starting July 1, 2016)



Rachel Irizarry, MD
College: Binghamton University - 2010
Medical School: SUNY – Health Science Center at Brooklyn - 2015
Internship: SUNY – Health Science Center at Brooklyn - 2017



Prayag Patel, MD
College: Boston University - 2012
Medical School: SUNY – Health Science Center at Brooklyn - 2016
Internship: SUNY – Health Science Center at Brooklyn - 2017



Alisa Timashpolsky, MD
College: Cornell University - 2011
Medical School: SUNY at Stony Brook – School of Medicine - 2016
Internship: SUNY – Health Science Center at Brooklyn - 2017

Graduating Residents

Sean Lewis, MD - will begin a one-year fellowship in laryngology at Mount Sinai

Punam Thakkar, MD - will begin a one-year fellowship in Head and Neck Surgery at the Hospital of the University of Pennsylvania

Jason Wasserman, MD - joined ENT & Allergy Associates and will be working in Bayside, NY

GRADUATION DINNER AT THE WATER CLUB



(L to R): Resident Alessi, Resident Ferzli, and Michael Weiss, MD



5 Staff: (L to R) Maria, Sheneeza, Pat and Tanaesia



Staff (L to R): Lana, Veronica, Courtney, Jasmine, Lissette and Raphael



Graduating Resident Wasserman and family



(L to R): Graduating Resident Thakkar, her husband Geet and Graduating Resident Lewis



(L to R): Resident Ferzli, Frank Lucente, MD and Resident Alessi



Resident Kaplowitz and his wife Blythe



(L to R): Richard Westreich, MD, Richard Rosenfeld, MD and Michael Weiss, MD



(L to R): Mohsen Habib, MD, Frank Lucente, MD and Richard Rosenfeld, MD



(L to R): Resident Floyd and Resident Gitman

GRADUATION DINNER AT



Parents of Graduating Resident Lewis



(L to R): Resident Ferzli, Resident Timashpolsky, her friend Georgi and Resident Abramowitz



Dr. John Weigand and his wife Sharon



(L to R): Dr. Boruk's husband Boris and Frank Lucente, MD



(L to R): Carole, Billy and Richard Rosenfeld, MD



(L to R): Resident Gitman and Joshua Silverman, MD

THE WATER CLUB



(L to R) Dr. John Weigand and Resident Ferzli



(L to R) Jessica Lim, MD and Sydney Butts, MD



Graduating Resident Lewis and his fiancé Daisy



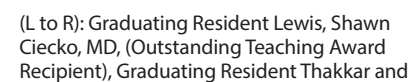
Resident Arjomandi and his wife Atousa



Graduating Resident Wasserman and his wife Corey



Richard Rosenfeld, MD, Distinguished Professor and Chairman speaking to the guests

DEPARTMENT OF OTOLARYNGOLOGY
RESIDENT ROTATION SCHEDULE
ACADEMIC YEAR 2016-2017

DEPARTMENT OF OTOLARYNGOLOGY RESIDENT ROTATION SCHEDULE ACADEMIC YEAR 2016-2017						
2016						
	KCHC/SUNY	NYM/Bayridge/185 Montague Ave/MEETH	RESEARCH	V/A	MAIMO	NON-OTO PGY-1
JULY						
	FLOYD KAPLOWITZ ALESSI SUKATO WU	ARJOMANDI ABRAMOWITZ BALLARD		GITMAN FERZLI	KOHLI	IRIZARRY(ENT-MAIMO) PATEL (ENT-KCHC/UHB) TIMASHPOLSKY(NEUROSURG-KCHC)
AUGUST						
	FLOYD KAPLOWITZ ALESSI SUKATO WU	ARJOMANDI ABRAMOWITZ BALLARD		GITMAN FERZLI	KOHLI	IRIZARRY(ENT-MAIMO) PATEL (ANES-UHB) TIMASHPOLSKY(ENT-KCHC/UHB)
SEPTEMBER						
	FLOYD KAPLOWITZ ALESSI SUKATO BALLARD	ARJOMANDI ABRAMOWITZ WU		GITMAN FERZLI	KOHLI	IRIZARRY(NEUROSURG-KCHC) PATEL (ENT-MAIMO) TIMASHPOLSKY (SICU)
OCTOBER						
	FLOYD KAPLOWITZ ALESSI SUKATO BALLARD	ARJOMANDI ABRAMOWITZ WU		GITMAN FERZLI	KOHLI	IRIZARRY (ENT-KCHC/UHB) PATEL (ENT-MAIMO) TIMASHPOLSKY (OMFS-KCHC)
NOVEMBER						
	ARJOMANDI KOHLI FERZLI WU BALLARD	GITMAN KAPLOWITZ SUKATO	ALESSI	FLOYD	ABRAMOWITZ	IRIZARRY (GEN. SURGERY-UHB) PATEL (SICU) TIMASHPOLSKY (ENT-MAIMO)
DECEMBER						
	ARJOMANDI KOHLI FERZLI WU BALLARD	GITMAN KAPLOWITZ SUKATO	ALESSI	FLOYD	ABRAMOWITZ	IRIZARRY (OMFS-KCHC) PATEL (GEN. SURGERY-BVA) TIMASHPOLSKY (ENT-MAIMO)

DEPARTMENT OF OTOLARYNGOLOGY
RESIDENT ROTATION SCHEDULE
ACADEMIC YEAR 2016-2017

		2017					
		KCHC/SUNY	NYM/Bayridge/185 Montague Ave/MEETH	RESEARCH	V/A	MAIMO	NON-OTO PGY-1
JANUARY	ARIOMANDI	GITMAN KAPLOWITZ FERZLI WU SUKATO	GITMAN KAPLOWITZ BALLARD	ALESSI	FLOYD	ABRAMOWITZ	IRIZARRY (ENT-MAIMO) PATEL (OMFS-KCHC) TIMASHPOLSKY (GEN SURGERY-UHB)
FEBRUARY	ARIOMANDI	GITMAN KAPLOWITZ FERZLI WU SUKATO	GITMAN KAPLOWITZ BALLARD	ALESSI	FLOYD	ABRAMOWITZ	IRIZARRY (ENT-MAIMO) PATEL (GEN. SURGERY-KCHCA) TIMASHPOLSKY (GENSURGERY-KCHCB)
MARCH	GITMAN	GITMAN ABRAMOWITZ BALLARD SUKATO	FLOYD KOHLI WU	FERZLI	ARIOMANDI ALESSI	KAPLOWITZ	IRIZARRY (SICU) PATEL (ENT-MAIMO) TIMASHPOLSKY (ANES-UHB)
APRIL	GITMAN	GITMAN ABRAMOWITZ HO BALLARD SUKATO	FLOYD KOHLI WU	FERZLI	ARIOMANDI ALESSI	KAPLOWITZ	IRIZARRY (GEN. SURGERY-KCHCB) PATEL (ENT-MAIMO) TIMASHPOLSKY (ENT-KCHC/UHB)
MAY	GITMAN	GITMAN ABRAMOWITZ HO BALLARD WU	FLOYD KOHLI SUKATO	FERZLI	ARIOMANDI ALESSI	KAPLOWITZ	IRIZARRY (ANES-UHB) PATEL (ENT-KCHC/UHB) TIMASHPOLSKY (ENT-MAIMO)
JUNE	GITMAN	GITMAN ABRAMOWITZ HO BALLARD WU	FLOYD KOHLI SUKATO	FERZLI	ARIOMANDI ALESSI	KAPLOWITZ	IRIZARRY (ENT-KCHC/UHB) PATEL (NEUROSURG-KCHC) TIMASHPOLSKY (ENT-MAIMO)

2016-2017 Resident Rotation Schedule

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, Oral and Maxillofacial Surgery and Neurosurgery. This year includes the following rotations, as mandated by the ACGME Program Requirements for Graduate Medical Education in Otolaryngology:

1. Six months of otolaryngology rotations.
2. Rotations selected from anesthesia, general surgery, neurological surgery, oral-maxillofacial surgery, pediatric surgery and plastic surgery. The total time for each non-otolaryngology rotation must be at least four weeks but must not exceed two months.
3. One month of an intensive care rotation

Rotations take place at KCHC, UHB, the BVAMC, Maimonides and RICHU 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.

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 Anotomy
- 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 and 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 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

Basic Science Education

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

- Introductory basic science conferences directed toward the first-,second- and third-year residents for 2 hours each week during July-September.
- Special targeted seminars are held approximately quarterly to integrate basic science and clinical topics (such as thyroid function and thyroid surgery).
- Didactic instruction in biostatistics, epidemiology, and basic science research by Richard Rosenfeld, Nira Goldstein, and Richard Kollmar.
- Monthly research conference that reviews current faculty and resident projects and monitors resident planning for the research rotation
- Protected 4-month research rotation during the PGY-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

PGY-1	Surgery (2 months selected from general surgery and pediatric surgery)	1 month in each of the following:	2-months: otolaryngology
PGY-2	KCHC/UHB	KCHC/UHB	Methodist
PGY-3	Research	BVAMC	KCHC/UHB
PGY-4	Ambulatory Care*/MEETH	Maimonides	KCHC/UHB
PGY-5	Methodist	BVAMC	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.

Radiology and Pathology

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

Combined Head and Neck Oncology

Twenty four times a year, the Departments of Oncology, Otolaryngology, Radiology, Radiation Therapy and Pathology meet 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.

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.

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.

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	19
Neck dissection (all types)	27	38
Glossectomy	10	16
Thyroid/parathyroidectomy	22	112
Otology/Audiology		
Tympanoplasty (all types)	17	46
Mastoidectomy (all types)	15	23
Stapedectomy/ossiculoplasty	10	16
Facial Plastic Reconstructive		
Rhinoplasty (all types)	8	31
Mandible/midface fractures	12	24
Flaps and Grafts	20	42
General/Pediatric		
Airway – pediatric and adult	20	87
Congenital neck masses	7	29
Ethmoidectomy	40	107
Bronchoscopy	22	88
Totals, Key Indicator Cases	245	678
Totals, All Cases	-	1,327

*Minimum cases as resident surgeon for accredited residency programs
**Mean cases for SUNY Downstate graduating chiefs in June 2016

SERVICE CHIEF REPORTS

Division of Pediatric Otolaryngology
Joshua B. Silverman, MD, PhD

The Division of Pediatric Otolaryngology, now in its 24th year of existence, has continued to achieve excellence in patient care, teaching, and research during the 2015-2016 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 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. After completing a successful tenure as Editor-in-Chief of the journal Otolaryngology - Head and Neck Surgery, Richard Rosenfeld, MD, MPH, continues to expand his role as senior advisor for guidelines of quality for the AAO-HNS. Nira Goldstein, MD, MPH, continues to be extremely active in 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, and was inducted into the American Society for Pediatric Otolaryngology in 2016. 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, New York Methodist Hospital and the Veteran's Administration Hospital. There was an even distribution of facial plastic surgery cases including trauma surgery, congenital deformity repair, functional nasal reconstruction, Mohs defect reconstruction and cosmetic facial procedures. Under the leadership of Dr. Eli Gordin, post-ablative head and neck reconstruction including microvascular free flaps are performed at most of the clinical sites. 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 include 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.

Division of Otology and Neurotology

Matthew B. Hanson, MD

The Division of Otology and Neurotology provides sub-specialized care for patients with diseases of the ear and temporal bone. In striving for optimal outcomes for our patients, their care is carefully coordinated with our colleagues in the Division of Communicative Disorders, where accurate diagnosis relies on advanced technology. Our Skull-Base team for treatment of neuro-otologic disorders includes colleagues in head and neck surgery and neurosurgery. 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 Otology/Neurotology 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, 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. 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 Division of Head and Neck Surgery in collaboration with Dr. Richard Kollmar and Dr. Rosenfeld had successfully secured Empire Clinical Research Investigator Program (ECRIP) Grant (\$150,000) to investigate 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 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.

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. 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	Supervisor of Audiology, responsible for training audiology residents. Saleh 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.

RESEARCH REPORT

In the year 2015-2016, Drs. Kollmar, Sundaram, Silverman, Stewart, and Alessi continued their work supported by an R21 from the NIDCD studying the restoration of recurrent laryngeal nerve function after injury in a rat model. Dr. Alessi presented their work on the effect of anesthesia on vocal fold motion and breathing patterns at the 2015 Annual Meeting of the American Academy of Otolaryngology – Head and Neck Surgery. The team has also collaborated with Dr. Stewart, Dr. Arjomandi and Dr. Kaplowitz to study post-obstructive pulmonary edema as a cause of sudden death in seizures, also in the rat model. Dr. Arjomandi presented this work at the 2016 meeting of the Association for Research in Otolaryngology. Dr. Chernichenko received a New York State ECRIP Fellowship Award to study the role of Rho GTPases in 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. The 2015 recipients of the SUNY Downstate Department of Otolaryngology Dr. Frank E. Lucente Resident Research Grants, made possible by the generous donation of a former graduate of our program Dr. Dennis Lee, were Dr. Kaplowitz for his work on a novel tracheostomy tube in mice to study sudden death in seizures and Dr. Ho to study nationwide characteristics and outcomes of patients undergoing laryngeal cleft repair.

Dr. Rosenfeld served as Senior Advisor for Guidelines and Quality for AAO-HNS, and helped develop clinical practice guidelines on rhinoplasty, otitis media with effusion and neck masses in adults and a clinical consensus statement development manual. Drs. Goldstein, Rosenfeld and Silverman are the lead investigators for a multi-institutional study validating the Clinical Assessment Score-15 (CAS-15) for pediatric sleep-disordered breathing. Drs. Butts and Gitman presented their work on the epidemiologic factors associated with the prevalence of orofacial clefts in New York City at the 73rd meeting of the American Cleft Palate- Craniofacial Association. Dr. Goldstein was awarded the Third Place Poster Award for her work on developmental delay in young children with sleep-disordered breathing at the annual meeting of the American Society of Pediatric Otolaryngology. Drs. Kaplowitz and Floyd presented their research at the 11th Metropolitan NY Resident Research Day Symposium.

Drs. Sundaram and Goldstein were guest editors of a special issue of the International Journal of Head and Neck Surgery honoring Dr. Lucente. Drs. Har-El, Sperling, Boruk, Bentsianov, Mor, Alessi, Kohli, Ferzli, Ho and Kaplowitz all contributed articles to this issue. Notable publications include Dr. Abramowitz’, Dr. Thakkar’s and Dr. Rosenfeld’s Adverse Event Reporting for Proton Pump Inhibitor Therapy: An Overview of Systematic Reviews published in Otolaryngology Head and Neck Surgery, Dr. Goldstein’s Developmental Delay in Young Children with Sleep-Disordered Breathing Before and After Tonsil and Adenoid Surgery published in the International Journal of Pediatric Otorhinolaryngology, Dr. Rosenfeld’s Clinical Consensus Statement Development Manual published in Otolaryngology Head and Neck Surgery, and Dr. Lewis’, Dr. Earley’s , Dr. Rosenfeld’s, and Dr. Silverman’s Surgical Treatment for Adult Laryngotracheal Stenosis, a Systematic Review published in The Laryngoscope.

Ongoing Research Projects

Faculty Research Projects:

Richard M. Rosenfeld, MD, MPH

- 1. AAO-HNS clinical practice guideline on rhinoplasty
- 2. AAO-HNS clinical practice guideline on otitis media with effusion
- 3. AAO-HNS clinical practice guideline on evaluation of neck masses in adults
- 4. AAO-HNS clinical consensus statement development manual
- 5. Multiple ongoing projects assisting otolaryngology residents with research design, systematic review, and data analysis

Boris Bentsianov, MD

- 1. Voice outcomes for in office versus injection laryngoplasty, a systematic review.
- 2. Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis

Sydney Butts, MD

- 1. Perceptual Assessment of Velopharyngeal Dysfunction by Otolaryngology Residents.
- 2. Epidemiological Factors Associated with Orofacial Clefting in New York City.

Marina Boruk, MD

- 1. The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis

Natalya Chernichenko, MD

- 1. A novel zebrafish xenograft model to study the role of Rho GTPases in perineural invasion.

Nira Goldstein, MD, MPH

- 1. Developmental delay in young children with sleep-disordered breathing before and after tonsil and adenoid surgery
- 2. Prospective evaluation of angioedema: An extubation protocol.
- 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
- 5. Analysis of outcomes and complications from button batteries as foreign bodies in the ear, nose or throat
- 6. Third branchial cleft cyst with mycobacterium infection
- 7. The role of corticosteroids in pediatric acute sinusitis with orbital complications

Eli Gordin, MD

- 1. Systematic review of the efficacy of functional rhinoplasty as measured by the NOSE score.

Richard Kollmar, PhD

- 1. Restoration of Recurrent-Laryngeal-Nerve Function after Injury in a Rat Model
- 2. Laryngospasm during Seizures
- 3. A Novel Zebrafish Xenograft Model to Study the Role of Rho GTPases in Perineural Invasion
- 4. Molecular Genetics of Otolith Formation in the Zebrafish

Abraham Shulman, MD

- 1. Calpain Inhibitor drug development- multicenter study SUNYDMC/U Miami Department of Otolaryngology, Department of Otolaryngology, Wayne State University
- 2. Tympanic membrane displacement test- external determination intracranial pressure, Department of Otolaryngology, University of Miami
- 3. TBI Investigation calpain Inhibitor ALA-1.0 animal model, SUNY TBI Group Noise induced tinnitus animal model - calpain Inhibitor ALA-1.0, Department of Otolaryngology, Wayne State
- 4. Brain function and Tinnitus- Neurometrics, Department Psychiatry New York University

Joshua Silverman, MD, MPH

- 1. Systematic Review for Surgical Treatment of Adult and Adolescent Laryngotracheal Stenosis
- 2. Systematic review for surgical treatment of pediatric laryngotracheal stenosis
- 3. Asthma Outcomes after Adenotonsillectomy: A Systematic Review
- 4. Restoration of Recurrent-Laryngeal-Nerve Function after Injury in a Rat Model
- 5. Laryngospasm and apnea during seizures in a rat model
- 6. Management of ACEI Angioedema: a tertiary care center’s prospective experience
- 7. Cervical Mature Teratoma Masquerading as a Thyroglossal Duct Cyst in an Adult with Thyroid Cancer
- 8. Treatment of Laryngotracheal Stenosis: The Brooklyn Experience
- 9. Multi-Institutional Validation of the Clinical Assessment Score-15 (CAS-15) for Pediatric Sleep-Disordered Breathing

Krishnamurthi Sundaram, MD

- 5. Effect of anesthesia on vocal fold motion in a rat model.

Resident Research Projects:

Jason Abramowitz, MD

- 1. Voice outcomes for in office versus injection laryngoplasty, a systematic review.
- 2. Harmonization of the AAO-HNSF and IDSA sinusitis clinical practice guidelines: Comparing the evidence for recommendations.

Anthony Alessi, MD

- 1. Effect of anesthesia on vocal fold motion in a rat model.

Hamid Arjomandi, MD

- 1. Harmonization of the AAO-HNSF and IDSA sinusitis clinical practice guidelines: Comparing the evidence for recommendations.

Daniel Ballard, MD

- 1. Voice outcomes for in office versus injection laryngoplasty, a systematic review.
- 2. Iodine deficiency among pregnant women in Central Brooklyn.

George Ferzli, MD

- 1. Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis
- 2. Dermatologic Manifestation of Streptococcal Infection: Tonsillectomy as a Treatment for Guttate Psoriasis

Elizabeth, Floyd, MD

- 1. Systematic review of functional rhinoplasty using NOSE score.
- 2. Prospective evaluation of angioedema: An extubation protocol.

Lyuba Gitman, MD

- 1. Patterns of orofacial clefting in New York City from 1983-2010: The impact of ethnicity, birthplace and other demographic factors

Sandra Ho, MD

- 1. Systematic review of functional rhinoplasty using NOSE score.
- 2. Analysis of outcomes and complications from button batteries as foreign bodies in the ear, nose or throat

Lee Kaplowitz, MD

- 1. Method for tracheostomy tube placement in mice

Nikita Kohli, MD

- 1. Systematic review on asthma outcomes after adenotonsillectomy.
- 2. Systematic review on pediatric laryngotracheal stenosis. In progress.
- 3. Poster presentation at ARS-literature review regarding treatment for subdural vs. extradural complications of acute sinusitis
- 4. Case report on post transplant lymphoproliferative disorder of the larynx.

Sean Lewis, MD

- 1. Surgical treatment for adult laryngotracheal stenosis, a systematic review

Daniel Sukato, MD

- 1. Case report: Concurrent use of intraluminal and external VAC in H&N necrotizing fasciitis
- 2. Case report: The use of paramedian forehead flap in inferior orbital rim reconstruction

Punam Thakkar, MD

- 1. Transoral Robotic Surgery for Excision of a Nasopharyngeal Hemangioma.
- 2. Secondary Clots in the Free-Flap Patient: Risk and Prophylaxis

Jason Wasserman, MD

- 1. The Role of Corticosteroids in the Treatment of Orbital Complications of Acute Sinusitis

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: _____

CORE INSTRUCTIONS FOR COMPLETING THE RESEARCH STRATEGY SECTION

The Research Strategy section must contain three components: Significance, Innovation and Approach.

Use the template provided to construct your research strategy. Do not use a font size less than 10 pt. Include sufficient information in the research strategy to facilitate an effective review without reference to any previous application(s). Be specific and informative; do not assume that the reviewer will know what you mean. Reviewers often consider brevity and clarity in the presentation to be indicative of a principal investigator/program director’s focused approach to a research objective and ability to achieve the specific aims of the project.

Research Strategy

Organize the Research Strategy in the specified order and using the instructions provided below. Start each section with the appropriate section heading – Significance, Innovation, Approach. Cite published experimental details in the Research Strategy section and provide the full reference in the Bibliography/References Cited.

(a) Significance

- Explain the importance of the problem or critical barrier to progress in the field that the proposed project addresses.
- Explain how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
- Describe how the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field will be changed if the proposed aims are achieved.

(b) Innovation

- Explain how the application challenges and seeks to shift current research or clinical practice paradigms.
- Describe any novel theoretical concepts, approaches or methodologies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation, or interventions.
- Explain any refinements, improvements, or new applications of theoretical concepts, approaches or methodologies, instrumentation, or interventions.

(c) Approach

- Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Include how the data will be collected, analyzed, and interpreted as well as any resource sharing plans as appropriate.
- Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the aims.
- If the project is in the early stages of development, describe any strategy to establish feasibility, and address the management of any high risk aspects of the proposed work.
- Point out any procedures, situations, or materials that may be hazardous to personnel and precaution to be exercised.

If applying for the Maureen Hannley grant and engaging the CHEER Network, include that information in your Approach.

If an applicant has multiple Specific Aims, then the applicant may address Significance, Innovation and Approach for each Specific Aim individually, or may address Significance, Innovation and Approach for all of the Specific Aims collectively.

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

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Cover Photo: John Zubrovitch



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